# Product Disclosure Statement

## About this Product Disclosure Statement

A Product Disclosure Statement is a document required by the Corporations Act 2001 (Cth) and contains information designed to help you decide whether to buy this product and to compare it with other products you may be considering.

This PDS sets out the cover available and the terms and conditions which apply. Please note that any recommendations or opinions in this document are of a general nature only and do not take into account your objectives, financial situation or needs.

This PDS will also contain information about the remuneration received by Allianz Global Assistance for its role, the services provided by it and how any complaint you have with Allianz Global Assistance can be dealt with.

This PDS, together with the Certificate of Insurance and any written document we tell you forms part of your policy, make up your contract with Allianz. Please retain these documents in a safe place.

## Understanding this product and its important terms and conditions

To properly understand this product’s significant features, benefits, limits, conditions and exclusions you need to carefully read:

- **Purchasing this product** - this contains important information on who can purchase this product, age limits and cover types available to you, on applicable excesses, the period of cover and extensions of cover;

- about the cover, and limits on the amount we will pay, that applies to each plan in the Table of benefits, when we will pay a claim under each section applicable to the cover you choose (Your policy cover), any options purchased by you under Additional options and Pre-existing medical conditions (remember, certain words have defined meanings – see Our definitions);

- **Important matters** - this contains important information on your duty of disclosure (including how the duty applies to you and what happens if you breach the duty), our privacy notice and dispute
resolution process, the Financial Claims Scheme, when you can choose your own doctor, when you should contact Allianz Global Assistance concerning 24 hour medical assistance, overseas hospitalisation or medical evacuation, and more;

» when we will not pay a claim under each section applicable to the cover you choose (Your policy cover) and General exclusions applicable to all sections; and

» Claims - this sets out important information about how we will pay claims. It also sets out certain obligations that you and we have. If you do not meet them we may refuse to pay a claim.

Applying for cover
When you apply for your policy, we will confirm with you things such as the period of cover, your premium, what cover options and excess will apply, and whether any standard terms are to be varied. These details will be recorded on the Certificate of Insurance issued to you.

If we are unable to offer you the cover you seek, it will be because the particular product offered is not designed to cover a particular risk or risks including, but not limited to, some geographical regions, some pre-existing medical conditions or some ages. In such a case, if you would like to discuss your options please use the contact details on the back cover of this PDS.

This PDS sets out the cover we are able to provide you with. You need to decide if the benefit limits, type and level of cover are appropriate for you and will cover your potential loss. If you have any queries, want further information about this product or want to confirm a transaction, please use the contact details on the back cover of this PDS.

About your premium
You will be told the premium payable for your policy when you apply. In calculating the premium, we take into account a number of factors including your destination(s), length of journey, the number of persons and age of persons to be covered under the policy and the plan type you select. The amount of any excess payable, cover for additional options and cover for agreed pre-existing medical conditions is also included in the calculation of your premium.

Your total premium reflects the amount we calculate to cover these factors as well as any relevant government charges, taxes or levies (such as stamp duty or GST) in relation to your policy.

These amounts are included in the total amount payable by you as shown in your Certificate of Insurance.

Cooling-off period
Even after you have purchased your policy, you have cooling-off rights.

If you decide that you do not want your policy, you may cancel it within 14 days after you are issued your Certificate of Insurance. You will be given a full refund of the premium you paid, provided you have not started your journey or you do not want to make a claim or to exercise any other right under your policy.

After this period you can still cancel your policy but we will not refund any part of your premium if you do.

Who is your insurer?
This product is underwritten by Allianz Australia Insurance Limited ABN 15 000 122 850 AFS Licence No. 234708, 2 Market Street, Sydney 2000.

Who is Allianz Global Assistance?
Allianz Global Assistance is a trading name of AGA Assistance Australia Pty Ltd ABN 52 097 227 177 AFS Licence No. 245631. Allianz Global Assistance has been authorised by Allianz to enter into the policy and deal with and settle any claims under it, as the agent of Allianz, not as your agent. Allianz Global Assistance acts under a binder which means that it can do these things as if it were the insurer. It administers all emergency assistance services and benefits of this insurance. You may contact Allianz Global Assistance in an emergency 24 hours a day, 7 days a week.

Updating the PDS
We may need to update this PDS from time to time if certain changes occur where required and permitted by law. We will issue you with a new PDS or a supplementary PDS to update the relevant information except in limited cases. Where the information is not something that would be materially adverse, from the point of view of a reasonable person considering whether to buy this product, Allianz Global Assistance may issue you with notice of this updated information (you can get a paper copy free of charge by calling the contact number shown on the back cover of this PDS).

Preparation date
The preparation date of this PDS is 1 October, 2015.
Our definitions

When the following words and phrases appear in this PDS, your Certificate of Insurance or any other document we tell you forms part of your policy, they have the meanings given below. The use of the singular shall also include the use of the plural.

**Accident**
means an unexpected event caused by something external and visible.

**Accompanying**
means travelling with the insured person for 100% of the journey.

**ADF or Australian Defence Forces or Defence Forces**
means the arms of the Defence Force referred to in the Defence Act 1903 (Cth).

**AICD/ICD**
means an implantable cardioverter-defibrillator (ICD), also known as an automated implantable cardioverter-defibrillator (AICD).

**Allianz**
means Allianz Australia Insurance Limited ABN 15 000 122 850, AFSL 234708.

**Allianz Global Assistance**
means AGA Assistance Australia Pty Ltd ABN 52 097 227 177, AFSL 245631.

**Appropriate supervision**
means under the supervision of a person who possesses the necessary skills, qualifications and licensing appropriate for the supervision of the activity being undertaken.

**Backcountry**
means outside the boundaries of a ski resort.

**Bicycle**
means any bicycle, tricycle, tandem, trailer cycle or push scooter that is powered by human pedalling and/or a battery.

**Business samples**
means demonstration goods or examples of goods sold by you or your company.

**Carrier**
means an aircraft, vehicle, train, tram, vessel or other scheduled transport operated under a licence for the purpose of transporting passengers. However, it does not mean a taxi, limousine or similar service.

**Certificate of Insurance**
is the document we give you which confirms that we have issued a policy to you and sets out details of your cover.

**Chronic**
means a persistent and lasting condition. It may have a pattern of relapse and remission.

**Concealed storage compartment**
means a boot, trunk, glove box, enclosed centre console, or concealed cargo area of a sedan, station wagon, hatchback, van or motorhome.

**Country of Assignment**
means the country to which you have been assigned by the Australian Defence Force.

**Cruise vessel**
means a boat or ship on which travel is taken for pleasure or as a holiday as a paying passenger, for a minimum of 3 nights in duration.

**Date of issue**
means the date and time of issue on your Certificate of Insurance.

**Defence Reserve**
means a person serving in the Army Reserve, the Air Force Reserve or the Naval Reserve.

**Dependant**
means your children or grandchildren, not in full-time employment, accompanying you on the journey and who are:

» under the age of 25; or

» aged 25 and over if unmarried and continuously physically or mentally incapable of self-support.

**Depreciation**
means the deduction from the original purchase price of an amount calculated to be the reduction in value because of wear and tear and/or the passing of time.

**Duo**
means you and your travelling companion as named on the Certificate of Insurance but does not include dependants.

**Epidemic**
means a sudden development and rapid spreading of a contagious disease in a region where it developed in a simply endemic state or within a previously unscathed community.

**Excess**
means the deduction we will make from the amount otherwise payable under your policy for each claimable incident or event.
Family means you, your spouse or partner and your dependants.

Formal wear means dinner suit, dress shirt, bowtie, evening gown, cocktail dress or other items of clothing which are required attire for formal dining/functions. This includes wedding attire but does not include jewellery.

Funeral expenses means the costs charged by a funeral director for arranging your funeral service and by a cemetery for your burial or a crematorium for your cremation. It does not include the cost of memorialisation.

Golf equipment means golf clubs, golf bag, golf trolley and golf shoes.

Heli-skiing means downhill skiing or snowboarding from locations only accessible by helicopter.

Home means the place where you normally live in Australia.

Hospital means an established hospital registered under any legislation that applies to it, that provides in-patient medical care.

Income means the amount of money you earn from personal exertion in a trade, business, profession or occupation after the deduction of income tax.

Individual means you only.

Injure or injured or injury means bodily injury caused solely and directly by violent, accidental, visible and external means, which happens at a definite time and place during your period of cover and does not result from any illness, sickness or disease.

Insolvency or insolvent means bankruptcy, provisional liquidation, liquidation, appointment of a receiver, manager or administrator, entry into any official or unofficial scheme of arrangement, statutory protection, restructuring or composition with creditors, or the happening of anything of a similar nature under the laws of any jurisdiction.

Jewellery means a form of personal adornment, such as brooches, rings, necklaces, earrings, and bracelets. It does not include watches or items of clothing.

Journey means travel which begins when you leave home or where you live in your country of assignment to commence your travel and ends when you arrive back home, or where you live in your country of assignment, or at a hospital or nursing home in Australia (if you are evacuated or repatriated), whichever is earlier.

Legal costs means fees, costs and expenses (including any applicable taxes and charges) in connection with a legal action. It also means any costs which you are ordered to pay by a court or arbitrator (other than any fine or penalty, or aggravated, punitive, exemplary or liquidated damages) or any other costs we agree to pay.

Luggage and personal effects means your suitcases, trunks and similar containers including their contents and articles worn or carried by you. It does not mean any bicycle, business samples or items that you intend to trade, valuables, snow sport equipment, passport or travel documents, cash, bank notes, currency notes, cheques, negotiable instruments, electronic data, software, intangible asset, watercraft of any type (other than surfboards), furniture, furnishings, household appliances, hired items or any other item listed as excluded on your Certificate of Insurance.

Manual labour means work involving physical labour including, but not limited to, construction, installation and assembly. It does not include bar and restaurant work, music and singing or fruit picking that does not involve the use of machinery.

Maximum journey period means the maximum period for any one journey under the Multi-Trip Plan as shown on your Certificate of Insurance.

Medical adviser means a qualified doctor or dentist, other than you or a relative, holding the necessary certification in the country in which they are currently practising.

Mental illness means any illness, condition or disorder listed in the current edition of the Diagnostic and Statistical Manual of Mental Disorders.

Moped or scooter means any two-wheeled or three-wheeled motor vehicle with an engine displacement of not greater than 50cc.
Motorcycle
means any two-wheeled or three-wheeled motor vehicle with an engine displacement greater than 50cc.

Off-piste
means areas within the boundaries of a ski resort that are not:
  » groomed terrain; or
  » marked slopes; or
  » trails that are open, maintained, monitored and patrolled by the ski resort.

Overseas
means outside of Australia and its territories.

Pandemic
means a form of an epidemic that extends throughout an entire continent.

PDS
means Product Disclosure Statement.

Permanent disability
means you have permanently lost all of the sight in one or both eyes, or the use of a hand at or above the wrist or a foot at or above the ankle.

Policy
means this PDS, Certificate of Insurance and any written document we tell you forms part of your policy.

Pre-existing medical condition
means a medical condition which you were aware of:
  1. prior to the time of the policy being issued that involves:
     a] your heart, brain or circulatory system/blood vessels; or
     b] your lungs or chronic airways disease; or
     c] cancer; or
     d] back pain requiring prescribed pain relief medication; or
     e] surgery involving any joints, the back, spine, brain or abdomen requiring at least an overnight stay in hospital; or
     f] Diabetes Mellitus (Type 1 or Type 2); OR
  2. in the 2 years prior to the time of the policy being issued:
     a] for which you have been in hospital or emergency department or day surgery; or
     b] for which you have been prescribed a new medication or had a change to your medication regime; or
     c] requiring prescription pain relief medication; OR
  3. prior to the time of the policy being issued that is:
     a] pregnancy; or
     b] connected with your current pregnancy or participation in an IVF program; OR
  4. for which, prior to the time of the policy being issued:
     a] you have not yet sought a medical opinion regarding the cause; or
     b] you are currently under investigation to define a diagnosis; or
     c] you are awaiting specialist opinion.

For the purposes of this definition “medical condition” includes a dental condition. The above definition applies to you, your travelling companion, a relative or any other person.

Professional Sport
means your participation in any sporting event where any participant receives, or is eligible to receive, an appearance fee, wage, salary or prize money in excess of $1,000. Participation includes training for, coaching or otherwise competing in that sporting event.

Public place
means any place that the public has access to, including but not limited to planes, trains, cruise ships, taxis, buses, air or bus terminals, stations, wharves, streets, shops, museums, galleries, hotels, hotel foyers and grounds, beaches, restaurants, private carparks, public toilets and general access areas.

Quad bike
means a motorised vehicle designed to travel on four or more wheels, having a seat straddled by the operator and handlebars for steering control.

Reasonable
means:
  » for medical, hospital or dental expenses, the standard level of care given in the country you are in not exceeding the level you would normally receive in Australia; or
  » for other covered expenses, a level comparable to those you have booked for the rest of your journey; or
  » as determined by the courts of Queensland.
Reciprocal Health Care Agreement means an agreement between the government of Australia and the government of another country where residents of Australia are provided with subsidised essential medical treatment. (Please visit www.dfat.gov.au for details of Reciprocal Health Care Agreements with Australia.)

Redundant or redundancy means loss of permanent paid full time employment (except voluntary redundancy), after a continuous working period of two years with the same employer.

Relative means for the purposes of this policy, your or your travelling companion’s mother, mother-in-law, father, father-in-law, step parent, step parent-in-law, sister, sister-in-law, brother, brother-in-law, wife, husband, son, son-in-law, daughter, daughter-in-law, step child, foster child, grandparent, grandchild, partner, fiancé(e), spouse or guardian only if they are under 85 years of age and resident in Australia or New Zealand.

Rental vehicle means a campervan/motorhome that does not exceed 4.5 tonnes, a sedan, coupe, hatchback, station-wagon, SUV, four wheel drive or mini bus/people mover rented from a licensed motor vehicle rental company or agency.

Resident of Australia means someone who ordinarily resides in Australia and is eligible for an Australian Medicare Card.

Sick or sickness means a medical condition, not being an injury, the symptoms of which first occur or manifest during your period of cover.

Single means you and your dependants who are accompanying you on the journey.

Snow sport activities means snow based activities conducted on groomed ski slopes within ski resort boundaries.

Snow sport equipment means skis, poles, boots, bindings, snowboards or ice skates.

Sporting equipment means equipment needed and used to participate in a particular sport and which can be carried about with you.

Transaction card means a debit card, credit card or travel money card.

Travelling companion means a person with whom you have made arrangements before your policy was issued, to travel with you for at least 75% of your journey.

Travel services provider means any scheduled service airline, hotel and resort operator, accommodation provider, motor vehicle rental or hire agency, bus line, shipping line or railway company.

Unsupervised means leaving your luggage and personal effects:

» with a person who is not named on your Certificate of Insurance or who is not a travelling companion or who is not a relative; or

» with a person who is named on your Certificate of Insurance or who is a travelling companion or who is a relative but who fails to keep your luggage and personal effects under close supervision; or

» where they can be taken without your knowledge; or

» at such a distance from you that you are unable to prevent them being taken; and

includes forgetting or misplacing items of your luggage and personal effects, leaving them behind or walking away from them.

Valuables means jewellery, watches, precious metals or semi precious stones/precious stones and items made of or containing precious metals or semi precious stones/precious stones, furs, binoculars, telescopes, computer games, any kind of photographic, audio, video, computer, television, fax and phone equipment (including mobile phones), tablets, MP3/4 players and PDAs.

We, our, us means Allianz Australia Insurance Limited ABN 15 000 122 850, AFSL 234708.

You, your and insured person means each person named on the Certificate of Insurance.
Purchasing this product

Who can purchase this product?
Cover is only available if:
» you are a resident of Australia; and
» you purchase your policy before you commence your journey; and
» your journey commences and ends in Australia, other than if you have been assigned overseas by the Australian Defence Force.

Age limits
Age limits are as at the date of issue.

Comprehensive and Domestic Plans
Available to travellers of all ages.

Multi Trip Plan
Available to travellers aged 74 years and under. Accompanying spouse or partner and dependants are covered under this product provided they are 74 years and under. Additional premium will apply.

Non-Medical Plan
Available to travellers of all ages who have a pre-existing medical condition or a circumstance which is listed under the heading Medical conditions/circumstances which automatically exclude all cover for medical or hospital expenses in the section headed Pre-existing medical conditions. Please call the contact number shown on the back cover of this PDS for further details.

Cover types
The following cover types are available:

Single - The benefit limits for single cover apply to the total of all claims combined regardless of the number of persons the claims relate to and are shown in the Table of benefits for the Plan you have selected.

Duo - The benefits limits for duo cover that apply to each insured person are shown in the Table of benefits for the Plan you have selected.

Family - The benefit limits for family cover apply to the total of all claims combined, regardless of the number of persons the claims relate to and are shown in the Table of benefits for the Plan you have selected.

Individual - The benefit limits for individual cover apply to the total of all claims combined and are shown in the Table of benefits for the Plan applicable.

Your choices
Under this product, you choose the cover you require based on your travel arrangements.

Whether you choose:
» single, duo, family or individual cover
» Comprehensive, Domestic, Multi-Trip or Non-Medical Plan,
depends on the type of cover you want and are eligible to purchase.

Please note: The Non-Medical Plan is only available to applicants who meet the eligibility criteria in the section headed Pre-existing medical conditions.

Period of cover
We will confirm the issue of your policy by providing you with a Certificate of Insurance. The period you are insured for is set out in the Certificate of Insurance.

For single trip cover
Cover for Sections 2.1 Cancellation Fees & Lost Deposits and 2.2 Travel Services Provider Insolvency only applies to those services scheduled to be used between the start and end dates shown on your Certificate of Insurance and begins from the date of issue and finishes at the end of your journey or on the end date shown on your Certificate of Insurance, whichever occurs earlier. The cover for all other sections starts at the beginning of your journey or the start date shown on your Certificate of Insurance, whichever occurs later, and finishes at the end of your journey or on the end date shown on your Certificate of Insurance, whichever occurs earlier.
For multi-trip cover
Cover for Sections 2.1 Cancellation Fees & Lost Deposits and 2.2 Travel Services Provider Insolvency begins on the start date shown on your Certificate of Insurance or the date you booked your journey, whichever is the later and finishes at the end of your journey or on the end date shown on your Certificate of Insurance, whichever occurs earlier. The cover for all other sections starts at the beginning of your journey or the start date shown on your Certificate of Insurance, whichever occurs later, and finishes at the end of your journey or on the end date shown on your Certificate of Insurance whichever occurs earlier.

Please note: The maximum period for any one journey under the Multi-Trip Plan is shown on your Certificate of Insurance (maximum journey period). You are not covered for any incident or event that arises outside of the maximum journey period you nominated.

Extension of cover
Your cover may be extended at no additional charge if you find that your return to Australia has been delayed because of one or more of the following:

» a bus line, airline, shipping line or rail authority you are travelling on, or that has accepted your fare or luggage and personal effects, is delayed; or

» the delay is due to a reason for which you can claim under your policy (subject to our written approval).

If the delay is for any other reason other than as stated above, we must receive your request to extend your cover at least 7 days before your original policy expires if you send your request by post.

All other requests to extend your cover must be received prior to your policy expiry date. Cover will be extended subject to our written approval, and your payment of the additional premium.

Where we have agreed to extend cover, we will issue you with a new Certificate of Insurance. The period of cover on your new Certificate cannot exceed 12 months.

Cover cannot be extended:

» for any pre-existing medical condition, unless it is listed under the heading Pre-existing medical conditions which may be covered with no additional premium payable in the Pre-existing medical conditions section, and you have not been hospitalised (including day surgery or emergency department attendance) for that condition in the past 24 months prior to application for the extension. This applies regardless of whether your pre-existing medical condition was covered under your original policy;

» for any medical conditions you suffered during the term of your original policy;

» where you have not advised us of any circumstances that have given (or may give) rise to a claim under your original policy;

» where at the time of application for the extension you are aged 75 years or over under the Comprehensive or Domestic Plan; or

» under the Multi-Trip and Non-Medical Plans.

Automatically included sports and activities
Your policy provides cover for claims arising directly from your participation in the following amateur sports and amateur recreational activities, subject to the terms, conditions, limits and exclusions that apply to the section under which your claim is made and the General exclusions applicable to all sections:

» Aqua zorbing;

» Archery;

» Bicycling (but not bicycle motorcross (BMX) or downhill mountain biking);

» Bungee jumping or canyon swinging;

» Camel, donkey or elephant riding (under appropriate supervision);

» Dancing;

» Dog sledding;

» Diving underwater using an artificial breathing apparatus at a depth no greater than 10 metres (you must hold an open water diving licence recognised in Australia or dive with an instructor licensed for these activities);

» Fishing (on land or within 2 nautical miles of a land mass);

» Go-karting;

» Golf;

» Gym activities (but not power-lifting);

» Gymnastics (but not competitions);

» Horse riding (but not competitions, equestrian events, steeple chasing, jumping, or polo);

» Ice skating on a rink (but not including competitive skating, racing, speed skating, and tour skating);
» Indoor rock climbing (under appropriate supervision);
» Leisure activities (meaning any activities involving minimal physical exertion that is undertaken for relaxation or pleasure. For example, sight-seeing, picnics, photography and museum or art gallery visits);
» Motorcycle, scooter or moped riding (restrictions apply - refer to General Exclusion A.13);
» Orienteering;
» Paintball (with eye protection);
» Racing on foot for distances up to and including full marathon (42.2 kilometres or 26.2 miles);
» Racquet and ball sports not involving physical contact;
» Regulated or licensed ballooning;
» River cruising;
» Safari (under appropriate supervision) but not hunting;
» Sailing up to 10 nautical miles off any land mass;
» Shark cage diving (subject to diving restrictions listed above);
» Shooting (fixed target only);
» Skateboarding, roller skating, inline skating (but not including vert skating or acrobatics);
» Snorkelling;
» Soccer;
» Surface water activities in rivers or rapids graded I, II or III under the International Scale of River Difficulty, or lakes or canals;
» Surface water activities (other than sailing) up to 2 nautical miles off any land mass;
» Track and field athletics, and
» Walking, hiking, trekking or tramping, peaking at altitudes up to 3,000 metres where specialist climbing equipment is not required (but not expeditions to or on the Kokoda Track/Trail).

All other sports and activities are excluded from cover under your policy, subject to any additional options that have been purchased and are listed on your Certificate of Insurance.

**Excess**

Your standard excess is shown on your Certificate of Insurance and applies EXCEPT where a benefit is payable under the following sections:

- Section 1.1 Overseas Emergency Medical Assistance
- Section 1.5 Hospital Cash Allowance
- Section 3.5 Domestic Services
- Section 3.6 Domestic Pets
- Section 4.2 Luggage & Personal Effects Delay Expenses
- Section 4.4 Theft Of Cash
- Section 7.9 Golf Green Fees
- Section 7.10 Hole In One
- Section 7.13 Cabin Confinement
- Section 7.16 Formal Cruise Attire Delayed
- Section 7.17 Marine Rescue Diversion

In some circumstances we may impose an additional excess for claims arising from some medical conditions. We will inform you in writing if any additional excess applies.

If you purchase Adventure pack or Snow pack the following sections have a $500 excess which applies to all claims under those sections (in addition to any standard excess) if your claim arises from your participation in sports and activities under Adventure pack in the Additional options section, or your participation in snow sport activities:

- Section 1.2 Overseas Emergency Medical & Hospital Expenses when Adventure pack or Snow pack has been purchased
- Section 2.1 Cancellation Fees & Lost Deposits when Adventure pack or Snow pack has been purchased
Table of benefits

Below is a table that sets out the cover that is provided under each Plan and the most we will pay in total for all claims under each section.

<table>
<thead>
<tr>
<th>Benefit Section</th>
<th>Comprehensive Plan</th>
<th>Domestic Plan</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Single</td>
<td>Duo (per person)</td>
</tr>
<tr>
<td>1.1* Overseas Emergency Medical Assistance^</td>
<td>Unlimited</td>
<td>Unlimited</td>
</tr>
<tr>
<td>1.2* Overseas Emergency Medical &amp; Hospital Expenses^</td>
<td>Unlimited</td>
<td>Unlimited</td>
</tr>
<tr>
<td></td>
<td>$1,000</td>
<td>$1,000</td>
</tr>
<tr>
<td>1.3* Emergency Dental Expenses (per person)</td>
<td>$25,000</td>
<td>$25,000</td>
</tr>
<tr>
<td>1.4* Accidental Death</td>
<td>$25,000</td>
<td>$25,000</td>
</tr>
<tr>
<td>1.5* Hospital Cash Allowance^</td>
<td>$5,000</td>
<td>$5,000</td>
</tr>
<tr>
<td>1.6* Loss of Income^</td>
<td>$10,400</td>
<td>$10,400</td>
</tr>
<tr>
<td></td>
<td>$1,300</td>
<td>$1,300</td>
</tr>
<tr>
<td>2.1* Cancellation Fees &amp; Lost Deposits</td>
<td>Unlimited</td>
<td>Unlimited</td>
</tr>
<tr>
<td></td>
<td>$10,000</td>
<td>$10,000</td>
</tr>
<tr>
<td>2.2* Travel Services Provider Insolvency</td>
<td>$50,000</td>
<td>$50,000</td>
</tr>
<tr>
<td></td>
<td>$2,000</td>
<td>$2,000</td>
</tr>
<tr>
<td>3.1* Additional Expenses</td>
<td>$5,000</td>
<td>$5,000</td>
</tr>
<tr>
<td>3.2* Travel Delay Expenses</td>
<td>$3,000</td>
<td>$3,000</td>
</tr>
<tr>
<td>3.3* Alternative Transport Expenses^</td>
<td>$500</td>
<td>$500</td>
</tr>
<tr>
<td>3.4* Return Airfare^</td>
<td>$500</td>
<td>$500</td>
</tr>
<tr>
<td>3.5* Domestic Services^</td>
<td>$10,000</td>
<td>$10,000</td>
</tr>
<tr>
<td>3.6* Domestic Pets^</td>
<td>$15,000</td>
<td>$15,000</td>
</tr>
<tr>
<td>3.7* Hijack &amp; Kidnap</td>
<td>$1,000</td>
<td>$1,000</td>
</tr>
<tr>
<td>4.1* Luggage &amp; Personal Effects</td>
<td>$5,000</td>
<td>$5,000</td>
</tr>
<tr>
<td>4.2* Luggage &amp; Personal Effects Delay Expenses</td>
<td>$500</td>
<td>$500</td>
</tr>
<tr>
<td>4.3* Travel Documents, Transaction Cards &amp; Travellers Cheques^</td>
<td>$6,000</td>
<td>$6,000</td>
</tr>
<tr>
<td>4.4* Theft of Cash</td>
<td>$2.5 million</td>
<td>$2.5 million</td>
</tr>
</tbody>
</table>

* sub-limits apply - refer to Your policy cover section of the PDS for details.

^ you do not have cover under these sections while travelling in Australia.
Table of benefits (continued)

<table>
<thead>
<tr>
<th>Benefit Section</th>
<th>Multi-Trip Plan</th>
<th>Non-Medical Plan</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.1* Overseas Emergency Medical Assistance*</td>
<td>Unlimited</td>
<td>—</td>
</tr>
<tr>
<td>Overseas Emergency Medical &amp; Hospital Expenses*</td>
<td>Unlimited</td>
<td>—</td>
</tr>
<tr>
<td>1.2* Emergency Dental Expenses (per person)</td>
<td>$1,000</td>
<td>—</td>
</tr>
<tr>
<td>1.3* Accidental Death</td>
<td>$25,000</td>
<td>$25,000</td>
</tr>
<tr>
<td>1.4* Permanent Disability*</td>
<td>$25,000</td>
<td>$25,000</td>
</tr>
<tr>
<td>1.5* Hospital Cash Allowance*</td>
<td>$5,000</td>
<td>—</td>
</tr>
<tr>
<td>Loss of Income*</td>
<td>$10,400</td>
<td>—</td>
</tr>
<tr>
<td>1.6* Sub-limit: Health Fund Cover</td>
<td>$1,300</td>
<td>—</td>
</tr>
<tr>
<td>2.1* Cancellation Fees &amp; Lost Deposits</td>
<td>Unlimited</td>
<td>Unlimited</td>
</tr>
<tr>
<td>2.2* Travel Services Provider Insolvency</td>
<td>$10,000</td>
<td>$10,000</td>
</tr>
<tr>
<td>3.1* Additional Expenses</td>
<td>$50,000</td>
<td>$50,000</td>
</tr>
<tr>
<td>3.2* Travel Delay Expenses</td>
<td>$2,000</td>
<td>$2,000</td>
</tr>
<tr>
<td>3.3* Alternative Transport Expenses*</td>
<td>$5,000</td>
<td>$5,000</td>
</tr>
<tr>
<td>3.4* Return Airfare*</td>
<td>$3,000</td>
<td>—</td>
</tr>
<tr>
<td>3.5* Domestic Services*</td>
<td>$500</td>
<td>—</td>
</tr>
<tr>
<td>3.6* Domestic Pets*</td>
<td>$500</td>
<td>—</td>
</tr>
<tr>
<td>3.7* Hijack &amp; Kidnap</td>
<td>$10,000</td>
<td>$10,000</td>
</tr>
<tr>
<td>4.1* Luggage &amp; Personal Effects</td>
<td>$15,000</td>
<td>$15,000</td>
</tr>
<tr>
<td>4.2* Luggage &amp; Personal Effects Delay Expenses</td>
<td>$1,000</td>
<td>$1,000</td>
</tr>
<tr>
<td>4.3 Travel Documents, Transaction Cards &amp; Travellers Cheques*</td>
<td>$5,000</td>
<td>$5,000</td>
</tr>
<tr>
<td>4.4 Theft of Cash</td>
<td>$500</td>
<td>$500</td>
</tr>
<tr>
<td>5.1* Rental Vehicle Insurance Excess</td>
<td>$6,000</td>
<td>$6,000</td>
</tr>
<tr>
<td>6.1 Personal Liability</td>
<td>$2.5 million</td>
<td>$2.5 million</td>
</tr>
</tbody>
</table>

Multi-Trip Plan
» 12 month policy
» Unlimited number of journeys
» Maximum period for any one journey is shown on your Certificate of Insurance. This is known as your maximum journey period.

IMPORTANT: When applying for this policy, you must choose the maximum journey period that will be sufficient to cover your longest journey. You can choose from one of these maximum journey periods: 15 days, 30 days or 45 days.

» Benefits limits and sub-limits reinstated on the completion of each journey except for Section 6.1 Personal Liability - the amount shown in the Table of benefits is the most we will pay for all claims combined for the 12 month policy period.

» Not available to travellers aged 75 years or over.

» Accompanying spouse or partner and dependants may be covered under this Plan provided that they are aged 74 years and under. Additional premium will apply.

* sub-limits apply - refer to Your policy cover section for details.
^ you do not have cover under these sections while travelling in Australia.
Additional options

Table of benefits

Below is a table that sets out the cover that is provided under each Plan and the most we will pay in total for all claims under each section.

<table>
<thead>
<tr>
<th>Benefit Section</th>
<th>Comprehensive Plan</th>
<th>Domestic Plan</th>
<th>Multi Trip Plan</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Single</td>
<td>Duo (per person)</td>
<td>Family</td>
</tr>
<tr>
<td>Snow pack</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7.5* Emergency Rescue^ ^^</td>
<td>$100,000</td>
<td>$100,000</td>
<td>$200,000#</td>
</tr>
<tr>
<td>7.6* Own Snow Sport Equipment^^</td>
<td>$2,000</td>
<td>$2,000</td>
<td>$4,000#</td>
</tr>
<tr>
<td>7.7 Snow Sport Equipment Hire^^</td>
<td>$2,000</td>
<td>$2,000</td>
<td>$4,000#</td>
</tr>
<tr>
<td>7.8 Snow Sport Pack^^</td>
<td>$1,000</td>
<td>$1,000</td>
<td>$2,000#</td>
</tr>
<tr>
<td>7.9* Piste Closure^^</td>
<td>$1,000</td>
<td>$1,000</td>
<td>$2,000#</td>
</tr>
<tr>
<td>7.10 Bad Weather &amp; Avalanche Closure^^</td>
<td>$1,000</td>
<td>$1,000</td>
<td>$2,000#</td>
</tr>
<tr>
<td>Golf pack</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7.11* Own Golf Equipment^^</td>
<td>$2,000</td>
<td>$2,000</td>
<td>$4,000</td>
</tr>
<tr>
<td>7.12 Golf Equipment Hire^^</td>
<td>$1,500</td>
<td>$1,500</td>
<td>$3,000</td>
</tr>
<tr>
<td>7.13 Golf Green Fees^^</td>
<td>$500</td>
<td>$500</td>
<td>$1,000</td>
</tr>
<tr>
<td>7.14 Hole in One^^</td>
<td>$250</td>
<td>$250</td>
<td>$500</td>
</tr>
<tr>
<td>Cruise pack</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7.15 Medical cover while Cruising^^</td>
<td>Unlimited</td>
<td>Unlimited</td>
<td>Unlimited</td>
</tr>
<tr>
<td>7.16* Evacuation Cover - Ship to Shore^^</td>
<td>Unlimited</td>
<td>Unlimited</td>
<td>Unlimited</td>
</tr>
<tr>
<td>7.17* Cabin Confinement^^</td>
<td>$500</td>
<td>$500</td>
<td>$1,000</td>
</tr>
<tr>
<td>7.18 Pre-paid Shore Excursion Cancellation^^</td>
<td>$1,000</td>
<td>$1,000</td>
<td>$2,000</td>
</tr>
<tr>
<td>7.19* Formal Cruise Attire Lost or Damaged^^</td>
<td>$1,000</td>
<td>$1,000</td>
<td>$2,000</td>
</tr>
<tr>
<td>7.20 Formal Cruise Attire Delayed^^</td>
<td>$250</td>
<td>$250</td>
<td>$500</td>
</tr>
<tr>
<td>7.21* Marine Rescue Diversion^^</td>
<td>$500</td>
<td>$500</td>
<td>$1,000</td>
</tr>
</tbody>
</table>

* sub-limits apply - refer to Your policy cover section of the PDS for details.

^ you do not have cover under this section while travelling in Australia.

^^ you only have cover for these sections if the relevant Pack has been purchased.

# note that where only one adult is shown as covered on the Certificate of Insurance, the benefit limit which will apply for this section will be the benefit limit for single cover for the Plan selected.
Additional options (continued)

Snow pack
You can purchase the Snow pack with the Comprehensive, Domestic or Multi-Trip Plans by paying an additional premium.

You will only have the cover provided under the sections included in the Snow pack if you select this option at the time of purchase and you have paid the required additional premium. Please refer to the Additional options Table of benefits and the applicable section in Your policy cover for details.

You cannot purchase sections of this pack individually.

You must be under the age of 75 at the date of issue.
This additional option does not provide cover for claims under Section 1.4 Permanent Disability or Section 6.1 Personal Liability that arise from you participating in snow sport activities.

An excess of $500, in addition to any standard excess, applies for all claims under Sections 1.2 Overseas Emergency Medical & Hospital Expenses and 2.1 Cancellation Fees & Lost Deposits if you purchase this option and your claim arises directly from you participating in snow sport activities. You cannot pay to remove this excess.

Golf pack
You can purchase the Golf pack with the Comprehensive, Domestic or Multi-Trip Plans by paying an additional premium.

You will only have the cover provided under the sections included in the Golf pack if you select this option at the time of purchase and you have paid the required additional premium. Please refer to the Additional options Table of benefits and the applicable section in Your policy cover for details.

You cannot purchase sections of this pack individually.

Cruise pack
You can purchase the Cruise pack with the Comprehensive, Domestic or Multi-Trip Plans by paying an additional premium.

You will only have the cover provided under the sections included in the Cruise pack if you select this option at the time of purchase and you have paid the required additional premium. Please refer to the Additional options Table of benefits and the applicable section in Your policy cover for details.

You cannot purchase sections of this pack individually.

Adventure pack
You can purchase the Adventure pack with the Comprehensive, Domestic or Multi-Trip Plans by paying an additional premium.

In addition to the Automatically included sports and activities listed in the section headed Purchasing this product, the sports and activities listed below are covered if you select this option at the time of purchase and you have paid the required additional premium:

» Abseiling;
» Animal conservation and handling (under appropriate supervision);
» Battle re-enactment (but not with firearms);
» Cave/river tubing;
» Caving/potholing;
» Contact sports (including any form of rugby, Australian Rules football or American football);
» Deep sea fishing;
» Diving underwater using an artificial breathing apparatus at a depth no greater than 30 metres (you must hold an open water diving licence recognised in Australia or dive with an instructor licensed for these activities);
» Expeditions to or on the Kokoda Track/Trail;
» Flying fox/zip lining;
» Hiking, trekking or tramping, peaking at altitudes from 3,000 metres up to 6,000 metres, where specialist climbing equipment is not required;
» Martial arts (but not training);
» Outdoor rock climbing (with ropes and appropriate safety gear);
» Quad bike riding (but only single rider);
participating in any of the sports or activities listed.
you claim arises directly from this option and if you apply for all claims under Sections 1.2 Overseas Emergency Medical & Hospital Expenses and 2.1 Cancellation Fees & Lost Deposits if you purchase this option and your claim arises directly from you participating in any of the sports or activities listed. You cannot pay to remove this excess.

All other activities not listed here or in the Automatically included sports and activities listed in the section headed Purchasing this product are not covered.

Increased item limits
Cover is provided under Sub-section 4.1.1 a] for loss, theft of or accidental damage to luggage and personal effects up to the item limits shown in sub-section 4.1.1 b] and the benefit limits shown in the Table of benefits for the Plan you have selected.

You can purchase increased item limit cover under sub-section 4.1.1 b] for item type(s) we give you the option to select, by paying an additional premium at the time you purchase your policy. Details of the item type(s) and the increased item limits selected and purchased are shown on your Certificate of Insurance. Increased Item Limit cover is only available for the particular item types that we give you the option to nominate when you purchase your policy.

No cover is provided under sub-sections 4.1.1 a] for any item(s) of a particular item type for which you have purchased an increased item limit under sub-section 4.1.1 b].

(For example: Sub-section 4.1.1 a] provides cover for mobile phones subject to an item limit of $1,000 which is included in the benefit limit for luggage and personal effects shown in the Table of benefits for the Plan you have selected. If you have one or more mobile phones, purchased for more than $1,000 each, you can purchase cover under sub-section 4.1.1 b] — increasing the limit for mobile phones to either $2,000 or $3,000.)

If you purchase an increased item limit for a nominated item type, and during your journey any items of that particular item type are stolen or accidentally damaged or permanently lost, we will pay up to the selected increased limit shown on your Certificate of Insurance for any one item of the nominated item type or for all items of the nominated item type combined.

We will not pay more than the original purchase price of any item. We have the option to repair or replace an item or paying you the amount it would cost us to repair or replace the item after allowing for any trade discounts we are entitled to.

Receipts and/or valuations must be provided proving your ownership of and the value of any item for which you make a claim.

Increased rental vehicle insurance excess cover
You can increase the benefit limit shown in the Table of benefits that applies to Section 5.1 Rental Vehicle Insurance Excess for all plans by nominating the level of additional cover required from the options we make available to you and paying an additional premium at the time you purchase your policy. The amount of additional cover purchased by you will be shown on your Certificate of Insurance.

Increase of standard excess
You may reduce your policy premium under the Comprehensive, Multi-Trip and Non-Medical Cover Plans by increasing the standard excess. Your selected excess will be listed on your Certificate of Insurance.

Decrease of standard excess
You may decrease your standard excess for all plans by paying an additional premium. Your selected excess will be listed on your Certificate of Insurance.
Pre-existing medical conditions

Please read this section carefully.

Unless otherwise agreed, the policy only provides medical and hospital expenses cover for unforeseen emergency medical events which occurred overseas. Cover is not provided for pre-existing medical conditions, unless they are a condition that we expressly agree to cover.

If you have a pre-existing medical condition that is not covered, we will not pay any claims arising from, related to or associated with that condition. This means that you may have to pay for an overseas medical emergency which can be very expensive in some countries.

Pre-existing medical condition is defined in the section headed Our definitions.

Medical conditions/circumstances which automatically exclude all cover for medical or hospital expenses

If you have any of the medical conditions/circumstances listed below, we are unable to offer you cover under this product for any type of medical or hospital expenses.

This means that if you suffer from such a medical condition/circumstance, you will not have medical or hospital expenses cover for these medical conditions/circumstances, or for any other medical conditions or circumstances which are not listed below:

» you are awaiting, or you have had, an organ transplant;
» you have been given a terminal prognosis with a life expectancy of under 24 months;
» you require home oxygen therapy, or you require oxygen for the journey;
» you have AIDS or an AIDS defining illness;
» you have chronic renal failure which is treated by haemodialysis or peritoneal dialysis.

If you suffer from any of the above medical conditions/circumstances, then you will still be able to obtain cover under the Non-Medical Plan- see Non-medical plan - Table of benefits for details of the cover provided.

If you are covered under the Non-Medical Plan, there will be no provision to claim under the following sections of your policy for any claims arising from, related to or associated with any injury or sickness suffered by you:

- Section 2.1: Cancellation Fees & Lost Deposits
- Section 3.1: Additional Expenses

This means that under the Non-Medical Plan we will not pay:

» any medical or hospital expenses;
» your journey cancellation or rearrangement costs; or
» any additional or out of pocket expenses (including additional travel and accommodation expenses).

Please call the contact number on the back cover of this PDS for further details.

Conditions which are undiagnosed or awaiting specialist opinion

Please note that we are unable to offer any cover for any medical conditions that you were aware of, or arising from signs or symptoms that you were aware of when your policy was issued, and for which at that time:

» you had not yet sought a medical opinion regarding the cause; or
» you were currently under investigation to define a diagnosis; or
» you were awaiting specialist opinion.

You may still purchase a travel insurance policy, or apply for cover for other pre-existing medical conditions, however, there will be no provision to claim under any section of the policy for any claims arising from, related to or associated with any of the above.

Pre-existing medical conditions which may be covered with no additional premium payable

Cover under this product may be provided for a pre-existing medical condition if the pre-existing medical condition is described in the following list, provided that you have not been hospitalised (including day surgery or emergency department attendance) for that condition in the 24 months prior to the time of your policy being issued.

We do not require any further information if your pre-existing medical condition is described in this list, and has not given rise to your hospitalisation (including day surgery or emergency department attendance) in the 24 months prior to the time of the policy being issued:
1. acne;
2. asthma, provided:
   » you are under 60 years of age, and
   » you have no other lung disease;
3. bunions;
4. carpal tunnel syndrome;
5. cataracts;
6. cleft palate;
7. cochlear implant;
8. coeliac disease;
9. congenital adrenal hyperplasia;
10. congenital blindness;
11. congenital deafness;
12. conjunctivitis;
13. dengue fever;
14. diabetes (type 1 or type 2), or glucose intolerance provided:
   » you were first diagnosed over 6 months ago; and
   » you had no complications in the last 12 months; and
   » you had no kidney, eye or neuropathy complications or cardiovascular disease; and
   » you are under 50 years of age;
15. dry eye syndrome;
16. Dupuytrens contracture;
17. ear grommets, if no current infection;
18. eczema;
19. gastric reflux (GORD);
20. glaucoma;
21. gout;
22. hay fever;
23. hiatus hernia, if no surgery planned;
24. hormone replacement therapy;
25. hypercholesterolaemia (high cholesterol), provided no cardiovascular disease and/or no diabetes;
26. hyperlipidaemia (high blood lipids), provided no cardiovascular disease and/or no diabetes;
27. hypertension, provided no cardiovascular disease and/or no diabetes;
28. hypothyroidism, including Hashimoto’s disease;
29. lipoma;
30. macular degeneration;
31. Meniere’s disease;
32. rhinitis;
33. rosacea;
34. sinusitis;
35. tinnitus; or
36. single uncomplicated pregnancy, up to and including 26 weeks, not arising from services or treatment associated with an assisted reproduction program including but not limited to, in vitro fertilisation (IVF).

Unless you qualify for the Non-Medical Plan, the above free conditions are available to you regardless of whether you elect not to pay the premium for cover of your pre-existing medical condition(s) or had cover declined for your pre-existing medical condition(s).

However, if you have been hospitalised (including day surgery or emergency department attendance) for the pre-existing medical condition in the 24 months prior to the time of policy issue, or your pre-existing medical condition does not meet the description above, then we will require further information from you and cover may be excluded.

Please refer to How do I apply for cover for my pre-existing medical condition? below if your pre-existing medical condition is not described above, or is described but has caused hospitalisation (including day surgery or emergency department attendance) in the 24 months prior to the time of policy issue.

Note that while pre-existing medical conditions not described above will require assessment, there are a range of medical conditions which may not result in any additional premium being charged.

How do I apply for cover for my pre-existing medical condition?

If you think you have a pre-existing medical condition and would like cover for that condition, please apply online or call the contact number shown on the back cover of this PDS.
If you have any questions about pre-existing medical conditions, please call the contact number shown on the back cover of this PDS.

Please note that if you have a pre-existing medical condition and:

a] you do not apply for cover for that pre-existing medical condition; or
b] you apply for cover for that pre-existing medical condition and we do not agree to provide cover for that pre-existing medical condition; or

c] we agree to provide cover for that pre-existing medical condition and you do not pay any relevant additional premium,
we will not pay any claims arising from, related to or associated with your pre-existing medical condition.

You cannot apply for cover for any medical conditions/circumstances which automatically exclude all cover for medical or hospital expenses as listed under the heading Medical conditions/circumstances that automatically exclude all cover for medical or hospital expenses appearing in this section of this PDS.

Important matters

Under your policy there are rights and responsibilities which you and we have. You must read this PDS in full for all details, but here are some you should be aware of.

Limitation of cover

Notwithstanding anything contained in this PDS we will not provide cover nor will we make any payment or provide any service or benefit to any person or party where providing such cover, payment, service or benefit would contravene or violate any applicable trade or economic sanction or any law or regulation.

Confirmation of cover

To confirm any policy transaction, (if the Certificate of Insurance does not have all the information you require), call Allianz Global Assistance using the contact number shown on the back cover of this PDS.

Jurisdiction and choice of law

Your policy is governed by and construed in accordance with the law of Queensland, Australia and you agree to submit to the exclusive jurisdiction of the courts of Queensland. You agree that it is your intention that this Jurisdiction and Choice of Law clause applies.

Your Duty of Disclosure

Before you enter into this insurance with us, you have a duty of disclosure under the Insurance Contracts Act 1984.

The Act imposes a different duty the first time you enter into a contract of insurance with us to that which applies when you vary, extend or reinstate the contract.

This duty of disclosure applies until the contract is entered into (or varied, extended or reinstated as applicable).

Your duty of disclosure when you enter into the contract with us for the first time

When answering our specific questions that are relevant to our decision whether to accept the risk of the insurance and, if so, on what terms, you must be honest and disclose to us anything that you know and that a reasonable person in the circumstances would include in answer to the questions.
It is important that you understand that you are answering our questions in this way for yourself and anyone else that you want to be covered by the contract.

Your duty of disclosure when you vary, extend or reinstate the contract

When you vary, extend or reinstate the contract with us, your duty is to disclose every matter that you know, or could reasonably be expected to know, is relevant to our decision whether to accept the risk of the insurance and, if so, on what terms.

What you do not need to tell us

Your duty however, does not require disclosure of any matter:

- that diminishes the risk to be undertaken by us; or
- that is of common knowledge; or
- that we know or, in the ordinary course of our business as an insurer, ought to know; or
- as to which compliance with your duty is waived by us.

Non-disclosure

If you fail to comply with your duty of disclosure, we may be entitled to reduce our liability under the contract in respect of a claim, cancel the contract or both.

If your non-disclosure is fraudulent, we may also have the option of avoiding the contract from its beginning.

Financial claims scheme

In the unlikely event Allianz Australia Insurance Limited were to become insolvent and could not meet its obligations under your policy, a person entitled to claim may be entitled to payment under the Financial Claims Scheme.

Access to the Scheme is subject to eligibility criteria - for more information see the APRA website at www.apra.gov.au or call the APRA hotline on 1300 558 849.

General Insurance Code of Practice

Allianz and Allianz Global Assistance proudly support the General Insurance Code of Practice.

The Code sets out the minimum standards of practice in the general insurance industry. For more information on the Code please call the contact number on the back cover of this PDS.

Dispute resolution process

In this section “we”, “our” and “us” means Allianz and Allianz Global Assistance.

If you have a complaint or dispute in relation to this insurance, or our services or our representatives, please call us using the contact details on the back cover of this PDS, or put the complaint in writing and send it to The Dispute Resolution Department, PO Box 162, Toowong, Queensland 4066. We will attempt to resolve the matter in accordance with our Internal Dispute Resolution procedures. To obtain a copy of our procedures, please contact us.

A dispute can be referred to Financial Ombudsman Service Australia (FOS), subject to its terms of reference. The FOS provides a free and independent dispute resolution service for consumers who have general insurance disputes falling within its terms.

The contact details for the FOS are:

Financial Ombudsman Service Australia
GPO Box 3, Melbourne Victoria 3001
Phone: 1800 367 287
Fax: (03) 9613 6399
Website: www.fos.org.au
Email: info@fos.org.au

Remuneration

The premium for your policy is payable to Allianz as the insurer.

Allianz Global Assistance is also remunerated by Allianz for providing services on behalf of Allianz. This is a percentage of the premium that you pay for your policy and is only paid if you buy this product. Employees and representatives of Allianz Global Assistance receive an annual salary, which may also include bonuses and/or other incentives, which can be based on performance or other criteria. This remuneration is included in the premium you pay.

If you would like more information about the remuneration that Allianz Global Assistance receives, please ask us. This request should be made within a reasonable time after this document is provided to you and before the financial services are provided to you.

Safeguarding your luggage & personal effects

You must take all reasonable precautions to safeguard your luggage and personal effects.
If you leave your luggage and personal effects unsupervised in a public place we will not pay your claim.

Claims

In the event of a claim, immediate notice should be given to Allianz Global Assistance using the contact details on the back cover of this PDS.

Please note: Receipts and/or valuations must be provided proving your ownership of, and the value of, any item for which you make a claim. Receipts must be provided for any expense for which you make a claim.

Allianz Global Assistance will consider your claim within 10 business days of receiving a completed claim form and all necessary documentation. If they need additional information, a written notification will be sent to you within 10 business days.

Privacy notice

To arrange and manage your travel insurance, we (in this Privacy Notice “we”, “our” and “us” includes AGA Assistance Australia Pty Ltd trading as Allianz Global Assistance and its duly authorised representatives) collect personal information including sensitive information from you and those authorised by you such as your family members, travelling companions, your doctors, hospitals, as well as from others we consider necessary, including our agents.

Any personal information provided to us is used by us to evaluate and arrange your travel insurance. We also use it to administer and provide the insurance services and manage your and our rights and obligations in relation to those insurance services, including managing, processing and investigating claims. We also collect, use and disclose it for product development, marketing, conducting customer research and analytics in relation to all of our products and services, IT systems maintenance and development, recovery against third parties, the detection and investigation of suspected fraud and for other purposes with your consent or where authorised by law.

This personal information is disclosed to third parties we engage or who assist us carry out the above functions or processes, such as travel agents and consultants, travel insurance providers and intermediaries, authorised representatives, other insurers, reinsurers, claims handlers and investigators, cost containment providers, medical and health service providers, overseas data storage and data handling providers, legal and other professional advisers, your agents and our related and group companies including Allianz. Some of these third parties may be located in other countries such as Thailand, France and India to name a few.

You agree that while those parties will often be subject to confidentiality or privacy obligations, they may not always follow the particular requirements of Australian privacy laws.

Unless you opt out, we may contact you on an ongoing basis by telephone, mail, electronic messages (including email), online and via other means with promotional material and offers of products or services that we consider may be relevant and of interest to you (including financial and insurance products and roadside assistance services). If you do not want to receive such offers from us (including product or service offerings from us on behalf of our agents, intermediaries and/or our business partners) or do not want us to disclose your personal information to our related and group companies and business partners for marketing purposes, you can opt out at any time by calling us on 1800 023 767.

When you provide personal information about other individuals, we and our agents rely on you to have made or make them aware:

» that you will or may provide their personal information to us;

» of the types of third parties to whom the personal information may be provided to;

» of the relevant purposes we and the third parties we will disclose it to, will use it for;

» of how they can access it; and

» of the other matters in this Privacy Notice.

We rely on you to have obtained their consent on these matters. If you do not, you must tell us before you provide the relevant information.

You can seek access to and correct your personal information by contacting us. You may not access or correct personal information of others unless you have been authorised by their express consent or otherwise under law, or unless they are your dependants under 16 years of age.

If you have a complaint about your privacy, please contact:
Privacy Officer, Allianz Global Assistance, PO Box 162, Toowong, QLD 4066 or you can contact the Privacy Commissioner at the Office of The Australian Information Commissioner, GPO Box 2999, Canberra, ACT 2601.
For more information about our handling of personal information, including further details about access, correction and complaints, please see our privacy policy available on request or via www.allianz-assistance.com.au/privacy-and-security/.

If you do not agree to the above or will not provide us with personal information, we may not be able to provide you with our services or products or may not be able to process your application nor issue you with a policy.

In cases where we do not agree to give you access to some personal information, we will give you reasons why.

**Overseas hospitalisation or medical evacuation**

For emergency assistance anywhere in the world at any time, Allianz Global Assistance is only a telephone call away. The team will help with medical problems, locating nearest medical facilities, your evacuation home, locating nearest embassies and consulates, as well as keeping you in touch with your family and work in an emergency.

If you are hospitalised, you, or a member of your travelling party, MUST contact Allianz Global Assistance as soon as possible. If you do not, then to the extent permitted by law, we will not pay for these expenses or for any evacuation or airfares that have not been approved or arranged by Allianz Global Assistance.

If you are not hospitalised but you are being treated as an outpatient and the total cost of such treatment is likely to exceed $2,000, you MUST contact Allianz Global Assistance.

Please note that we will not pay for any hospital or medical costs incurred in Australia.

**You can choose your own doctor**

Unless you are treated under a Reciprocal Health Care Agreement you are free to choose your own medical adviser or, if you ask them to, Allianz Global Assistance can appoint an approved medical adviser to see you.

You must, as soon as possible, advise Allianz Global Assistance of your admittance to hospital or your early return to Australia based on written medical advice.

If you do not get the medical treatment you expect, Allianz Global Assistance can assist you but neither Allianz nor Allianz Global Assistance are liable for anything that results from that.

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**General exclusions applicable to all sections**

The Exclusion column is a summary for reference only and does not affect interpretation.

To the extent permitted by law we will not pay if:

<table>
<thead>
<tr>
<th>No.</th>
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<tbody>
<tr>
<td>A.1</td>
<td>Acting intentionally or recklessly</td>
<td>You intentionally or recklessly act in a way that would reasonably pose a risk to your safety or the safety of your luggage and personal effects, except in an attempt to protect the safety of a person or to protect property.</td>
</tr>
<tr>
<td>A.2</td>
<td>Loss mitigation</td>
<td>You do not do everything you can to reduce your loss as much as possible.</td>
</tr>
<tr>
<td>A.3</td>
<td>Consequential loss</td>
<td>Your claim is for consequential loss of any kind including loss of enjoyment.</td>
</tr>
<tr>
<td>A.4</td>
<td>Change of plans</td>
<td>Your claim arises as a result of you or your travelling companion changing plans, or the breakdown or dissolution of any personal or family relationship.</td>
</tr>
<tr>
<td>A.5</td>
<td>Aware of circumstances</td>
<td>At the time of purchasing this product, you were aware of something that would give rise to you making a claim under your policy.</td>
</tr>
<tr>
<td>A.6</td>
<td>Workers compensation</td>
<td>Your claim is for a loss which is recoverable by compensation under any workers compensation or transport accident laws or by any government sponsored fund, plan, or medical benefit scheme, or any other similar type legislation required to be effected by or under a law.</td>
</tr>
</tbody>
</table>
| A.7 | Manual work                 | Your claim arises directly or indirectly from, or is in any way connected with, you engaging in:  
                                                                                                         • manual labour; or  
                                                                                                         • missionary work and related travel; or  
                                                                                                         • humanitarian work and related travel. |
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<tbody>
<tr>
<td>A.8</td>
<td>Errors or omissions</td>
<td>Your claim arises from errors or omissions in any booking arrangements or failure to obtain relevant visa, passport or travel documents.</td>
<td></td>
</tr>
<tr>
<td>A.9</td>
<td>Insolvency</td>
<td>Your claim arises from the refusal, failure or inability of any person, company or organisation (including but not limited to any airline, or other transportation provider, hotel, car rental agency, tour or cruise operator, travel wholesaler, booking agent or other provider of travel or tourism related services, facilities or accommodation), to provide services, facilities or accommodation, by reason of their own insolvency or the insolvency of any person, company or organisation with whom or with which they deal. (This exclusion does not apply to Section 2.2 Travel Services Provider Insolvency).</td>
<td></td>
</tr>
<tr>
<td>A.10</td>
<td>Illegal acts</td>
<td>Your claim arises because you breach any government prohibition or regulation, including visa requirements, or intentionally act illegally. This exclusion does not apply to vehicle driver licensing, motorcycle/moped rider licensing or traffic offences.</td>
<td></td>
</tr>
<tr>
<td>A.11</td>
<td>Invitees</td>
<td>Your claim arises directly or indirectly from, or is in any way connected with, the conduct of someone who enters your accommodation with your consent, or whose accommodation you choose to enter.</td>
<td></td>
</tr>
<tr>
<td>A.12</td>
<td>Government confiscation</td>
<td>Your claim arises from a government authority confiscating, detaining or destroying anything.</td>
<td></td>
</tr>
</tbody>
</table>
| A.13| Vehicles                      | Your claim arises directly or indirectly from, or is in any way connected with:  
- you driving a motor vehicle or riding a moped or scooter without a current Australian drivers licence or drivers licence valid for the country you are driving or riding in. This applies even if you are not required by law to hold a licence in the country you are riding in;  
- you riding a motorcycle without a current Australian motorcycle licence or motorcycle licence valid for the country you are riding in. This applies even if you are not required to hold a motorcycle licence because you hold a drivers licence, or a motorcycle licence is not required by law in the country you are riding in;  
- you travelling as a passenger on a motorcycle, moped or scooter that is in the control of a person who does not hold a current motorcycle or drivers licence valid for the vehicle being ridden and for the country you are riding in;  
- you riding, or travelling as a passenger, on a motorcycle with an engine capacity greater than 250cc or on a quad bike except as provided under the Additional option - Adventure pack and you have paid the additional premium for Adventure pack;  
- you riding, or travelling as a passenger, on a motorcycle, moped, scooter or quad bike without wearing a helmet. |   |
| A.14| Epidemic/pandemic             | Your claim arises from, is related to or associated with:  
- an actual or likely epidemic or pandemic; or  
- the threat of an epidemic or pandemic.  
Refer to www.who.int and www.smartraveller.gov.au for further information on epidemics and pandemics. |   |
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<tbody>
<tr>
<td>A.15</td>
<td>Government warning</td>
<td>Your claim arises from, or is associated with, travel to countries or parts of a country for which:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1 a] an advice or warning has been released by the Australian Government Department of Foreign Affairs and Trade or any other government or official body, and</td>
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<td></td>
<td>1 b] the advice or warning risk rating is “Reconsider your need to travel” or “Do not travel” (or words to that effect) or the advice or warnings advise against all non-essential travel to or in that location or advise against specific transport arrangements or participation in specific events or activities, or</td>
</tr>
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<td></td>
<td>2. the mass media has indicated the existence or potential existence of circumstances (including circumstances referred to in 1 a] and 1 b] above) that may affect your travel; and</td>
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<td></td>
<td>3. you did not take appropriate action to avoid or minimise any potential claim under your policy (including delay of travel to the country or part of the country referred to in the relevant advice(s), warning(s) and/or mass media statement(s). Circumstances, in this case, includes but are not limited to strike, riot, weather event, civil protest or contagious disease (including an epidemic or pandemic).</td>
</tr>
<tr>
<td>A.16</td>
<td>War</td>
<td>Your claim arises from any act of war, whether war is declared or not, or from any rebellion, revolution, insurrection or taking of power by the military.</td>
</tr>
<tr>
<td>A.17</td>
<td>Nuclear</td>
<td>Your claim arises from a nuclear reaction or contamination from nuclear weapons or radioactivity.</td>
</tr>
<tr>
<td>A.18</td>
<td>Chemical/biological</td>
<td>Your claim arises from biological and/or chemical materials, substances, compounds or the like used directly or indirectly for the purpose to harm or to destroy human life and/or create public fear.</td>
</tr>
<tr>
<td>B.1</td>
<td>Pre-existing medical</td>
<td>Your claim arises directly or indirectly from, or is in any way connected with, any pre-existing medical condition of any person including you, your travelling companion or a relative except as provided under sub-section 2.1.1 e], and sub-section 3.1.1. e]. This exclusion will not apply:</td>
</tr>
<tr>
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<td>• if you satisfy the provisions as set out under the heading Pre-existing medical conditions which may be covered with no additional premium payable contained in the Pre-existing medical conditions section, or</td>
</tr>
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<td></td>
<td>• as provided in you Medical Terms of Cover letter and from the time any additional premium that applies has been received by us for pre-existing medical conditions for which you must apply for cover and for which approval has been given by us. Special conditions, limits and excesses may apply if we notify you in writing.</td>
</tr>
<tr>
<td>B.2</td>
<td>Signs and symptoms</td>
<td>Your claim arises from, is related to or associated with any signs or symptoms that you were aware of before cover commenced, but:</td>
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<td>a] you had not yet sought a medical opinion regarding the cause; or</td>
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<td></td>
<td>b] you were currently under investigation to define a diagnosis; or</td>
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<td></td>
<td></td>
<td>c] you were awaiting specialist opinion.</td>
</tr>
<tr>
<td>B.3</td>
<td>Travel against medical advice</td>
<td>Your claim is in respect of travel booked or undertaken against the advice of any medical adviser.</td>
</tr>
<tr>
<td>No.</td>
<td>Exclusion</td>
<td>Wording</td>
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<tr>
<td>B.4</td>
<td>Metastatic/terminal prognosis</td>
<td>Your claim arises from any medical condition where a metastatic or terminal prognosis was made prior to the issue of your Certificate of Insurance.</td>
</tr>
</tbody>
</table>
| B.5 | Pregnancy                                     | Your claim arises directly or indirectly out of pregnancy, childbirth or related complications unless it is a single, uncomplicated pregnancy (up to and including 26 weeks) or we have agreed in writing to provide cover. In any event we will not pay medical expenses for:  
  • regular antenatal care;  
  • childbirth at any gestation; or  
  • care of the newborn child. |
| B.6 | Treatment for addiction                       | Your claim involves a hospital or clinic where you are being treated for addiction to drugs or alcohol, or are using it as a nursing, convalescent or rehabilitation place.                                                                                                                                                                                      |
| B.7 | Medication already in use                     | Your claim involves the cost of medication in use at the time the journey began or the cost for maintaining a course of treatment you were on prior to the start of the journey.                                                                                                                                                                                             |
| B.8 | Mental/nervous conditions                     | Your claim arises from or is in any way related to mental illness or:  
  • dementia, depression, anxiety, stress or other mental or nervous condition; or  
  • conditions that have resulted in behavioural issues; or  
  • a therapeutic or illicit drug or alcohol addiction. |
<p>| B.9 | Suicide                                       | Your claim arises from suicide or attempted suicide of any person.                                                                                                                                                                                                                                                                 |
| B.10| STD                                           | Your claim arises directly or indirectly from, or is in any way connected with, a sexually transmitted disease or virus, unless we have agreed in writing to provide cover as set out in your Medical Terms of Cover letter and you have paid any additional premium that applies.                                                                                   |
| B.11| Under the influence                           | Your claim arises directly or indirectly from, or is in any way connected with you being under the influence of any intoxicating liquor or drugs except a drug prescribed to you by a medical adviser, and taken in accordance with their instructions.                                                                                                        |
| B.12| Private medical treatment                     | Despite the advice given following your call to Allianz Global Assistance, you received private hospital or medical treatment where public funded services or care is available in Australia or under any Reciprocal Health Care Agreement between the Government of Australia and the government of any other country.                       |
| B.13| AICD/ICD                                      | Your claim arises from any medical procedures in relation to Automated Implantable Cardioverter-Defibrillator/Implantable Cardioverter-Defibrillator (AICD/ICD) insertion during overseas travel. If you require this procedure, due to sudden and acute onset which occurs for the first time during your period of cover and not directly or indirectly related to a pre-existing medical condition, we will exercise our right based on medical advice, to organise a repatriation to Australia for this procedure to be completed. |
| B.14| 85 and over                                   | Your claim arises from or is any way related to the death or hospitalisation of any person aged 85 years and over, who is not listed on the Certificate of Insurance, regardless of the country in which they may live.                                                                                                                    |
| B.15| Elective surgery                              | Your claim arises from, is related to or associated with elective surgery, or treatment.                                                                                                                                                                                                                                                                 |
| B.16| Complications                                 | Your claim arises from, or is a consequence of complications from medical, surgical or dental procedures or treatments that are not for an injury or sickness that would be otherwise be covered by this policy.                                                                                                               |</p>
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<tr>
<td>B.17</td>
<td>Health insurance</td>
<td>Your claim arises from, or is in any way related to or associated with any loss, damage, liability, event, occurrence, injury or sickness where providing such cover would result in us contravening the Health Insurance Act 1973 (Cth), the Private Health Insurance Act 2007 (Cth) or the National Health Act 1953 (Cth) or where Allianz does not have the necessary licenses or authority to provide such cover.</td>
</tr>
<tr>
<td>C.1</td>
<td>Sports &amp; activities</td>
<td>Your claim arises from, or is in any way connected with you participating in any sports or recreational activities not listed in the Automatically included sports and activities list in the Purchasing this product section, except as provided under the Additional option - Snow pack and you have paid the additional premium for Snow pack or under Additional option - Adventure pack and you have paid the additional premium for Adventure pack.</td>
</tr>
<tr>
<td>C.2</td>
<td>Racing</td>
<td>Your claim arises directly or indirectly from, or is in any way connected with, you participating in any race, speed or time trial, or endurance event except for amateur racing on foot in races for distances up to and including the full marathon (42.2 kilometres or 26.2 miles).</td>
</tr>
<tr>
<td>C.3</td>
<td>Diving</td>
<td>Your claim arises because you dive underwater, greater than 10 metres, using an artificial breathing apparatus, except as provided under the Additional option - Adventure pack and you have paid the additional premium for Adventure pack. There is no cover under this policy if your claim arises due to you diving alone.</td>
</tr>
<tr>
<td>C.4</td>
<td>Air supported device</td>
<td>Your claim arises from travel in any air supported device other than as a passenger in a fully licensed aircraft operated by an airline or charter company. This exclusion does not apply to regulated or licensed ballooning.</td>
</tr>
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<tbody>
<tr>
<td>C.5</td>
<td>Snow sport activities</td>
<td>Your claim arises from, or is in any way associated with you participating in snow sport activities except as provided under the Additional option - Snow pack and you have paid the additional premium for Snow pack.</td>
</tr>
<tr>
<td>C.6</td>
<td>Protective gear</td>
<td>Your claim arises directly or indirectly from, or is in any way connected with, you not wearing the appropriate protective clothing and head protection for the sport or activity you are participating in.</td>
</tr>
<tr>
<td>C.7</td>
<td>Ignoring safety warnings</td>
<td>Your claim arises directly or indirectly from, or is in any way connected with, you not observing all safety warnings and advice about adverse weather and terrain conditions.</td>
</tr>
<tr>
<td>C.8</td>
<td>Professional sport</td>
<td>Your claim arises from you or your travelling companion participating in professional sport of any kind.</td>
</tr>
<tr>
<td>C.9</td>
<td>Cruise exclusion</td>
<td>Your claim arises directly or indirectly from, or is in any way connected with travel on a cruise vessel except as provided under the Additional option - Cruise pack and you have paid the additional premium for Cruise pack. (This exclusion does not apply to river cruising).</td>
</tr>
</tbody>
</table>
Your policy cover

The maximum amount we will pay for all claims combined under each section is shown in the Table of benefits for the Plan you have selected. Your Certificate of Insurance will also show the Additional options you are covered for. You must also check General exclusions applicable to all sections for reasons why we will not pay.

Section 1.1  Overseas Emergency Medical Assistance

Allianz Global Assistance will help you with any overseas medical emergency (see Overseas hospitalisation or medical evacuation contained in the section Important matters). You may contact them at any time 7 days a week.

1.1.1  Allianz Global Assistance will arrange

Allianz Global Assistance will arrange for the following assistance services if you injure yourself, or become sick while overseas during your journey provided the relevant injury or sickness is covered by your policy:

a] access to a medical adviser for emergency medical treatment while overseas;

b] any messages which need to be passed on to your family or employer in the case of an emergency;

c] provision of any written guarantees for payment of reasonable expenses for emergency hospitalisation while overseas;

d] your medical transfer or evacuation if you must be transported to the nearest hospital for emergency medical treatment overseas or be brought back to Australia with appropriate medical supervision; and

e] the return to Australia of your dependants if they are left without supervision following your hospitalisation or evacuation.

In addition:

f] If you die as a result of an injury or a sickness during your journey, we will pay for your reasonable funeral expenses incurred overseas or the cost of bringing your remains back to your home. The maximum amount we will pay is $15,000 per person.

Please note that we will not pay for any costs incurred in Australia except the reasonable cost of transporting your remains from the inbound port or airport to your home or nominated funeral home.
1.2.1 We will pay

To the extent permitted by law, we will not pay:

a] for any expenses for medical evacuation, funeral expenses incurred overseas or bringing your remains back to Australia unless it has been first approved by Allianz Global Assistance;

b] if you decline to promptly follow the medical advice we have obtained, and we will not be responsible for subsequent medical, hospital or evacuation expenses;

c] for medical evacuation or the transportation of your remains from Australia to an overseas country; or

d] any claims under this section arising from your participation in snow sport activities. However, you may have cover under Section 7.1 Emergency Rescue if you have purchased the Snow pack.

Section 1.2 Overseas Emergency Medical & Hospital Expenses

1.2.1 We will pay

a] We will reimburse the reasonable medical or hospital expenses you incur until you get back to Australia if you injure yourself overseas, or become sick while overseas. The medical or hospital expenses must have been incurred on the written advice of a medical adviser. You must make every effort to keep your medical or hospital expenses to a minimum.

If we determine, on medical advice, that you should return home for treatment and you do not agree to do so, we will pay you an amount up to the limit shown in the Table of benefits, which we reasonably consider to be equivalent to:

» your medical expenses and/or related costs incurred overseas to the date we advise you to return to Australia; plus

» the amount it would cost us to return you to Australia; plus

» the amount of any cancellation fees and lost deposits you would have incurred had you followed our advice.

You will then be responsible for any ongoing or additional costs relating to or arising out of the event you have claimed for.

We will only pay for treatment received and/or hospital accommodation during the 12 month period after the sickness first showed itself or the injury happened.

We will also pay the cost of emergency dental treatment up to the limit shown in the Table of benefits for the Plan selected for dental costs incurred which the treating dentist certifies in writing is for the relief of sudden and acute pain to sound and natural teeth. This limit does not apply to dental costs arising from any injury that is covered under sub-section 1.2.1 a).

1.2.2 We will not pay

To the extent permitted by law, we will not pay for expenses:

a] when you have not notified Allianz Global Assistance as soon as practicable of your admittance to hospital;

b] incurred after 2 weeks treatment by a chiropractor, physiotherapist or dentist, unless approved by Allianz Global Assistance;

c] if you do not follow the advice of Allianz Global Assistance;

d] if you have received medical care under a Reciprocal Health Care Agreement;

e] for damage to dentures, dental prostheses, bridges or crowns;

f] relating to dental treatment involving the use of precious metals or for cosmetic dentistry;

g] for dental treatment caused by or related to the deterioration and/or decay of teeth; or


Section 1.3 Accidental Death

1.3.1 We will pay

We will pay the accidental death benefit, to your estate, if:

a] you are injured during your journey and you die because of that injury within 12 months of the injury; or

b] during your journey, something you are travelling on or in disappears, sinks or crashes and you are presumed dead and your body is not found within 12 months.

The amount we will pay for the death of each adult who is not an accompanying dependant is the benefit limit for single or individual cover for the Plan selected.

The amount we will pay for the death of an accompanying dependant (if cover is provided for accompanying dependants under the Plan you have selected) is $5,000.
Section 1.4  Permanent Disability

1.4.1  We will pay
We will pay:

a] if you are injured during your journey; and
b] because of the injury, you suffer permanent disability within 12 months of the injury; and

c] your permanent disability continues for at least 12 consecutive months and at the expiry of that period, in the opinion of an appropriate medical specialist, is beyond hope of improvement.

The amount we will pay for a claim under this section by each adult who is not an accompanying dependant is the benefit limit for single or individual cover for the Plan selected.

The amount we will pay for the permanent disability of an accompanying dependant (if cover is provided for accompanying dependants under the Plan you have selected) is $5,000.

1.4.2  We will not pay
We will not pay if your permanent disability arises from, is related to or associated with your participation in snow sport activities or sports and activities listed under Adventure pack in the Additional options section.

Section 1.5  Hospital Cash Allowance

1.5.1  We will pay
We will pay you $50 for each day you are in hospital if you are in hospital for more than 48 continuous hours while you are overseas.

1.5.2  We will not pay
We will not pay:

a] for the first 48 continuous hours you are in hospital; and
b] if you cannot claim for overseas medical expenses connected with the hospitalisation under Section 1.2 Overseas Medical & Hospital Expenses.

Section 1.6  Loss of Income

1.6.1  We will pay
If during your journey you suffer an injury requiring medical treatment overseas, and:

» because of the injury you become disabled within 30 days; and

» the disablement continues for more than 30 consecutive days from the date of your return to Australia; and

» you are under the regular care of, and acting in accordance with, the instructions or advice of a medical adviser who certifies in writing that the disablement prevents you from gainful employment; and

» as a result you lose all your income, then we will pay you starting from the 31st day after your return to Australia:

» up to $400 per week for a period of up to 26 continuous weeks; and

» up to $50 per week towards the premium(s) you must pay for your private health insurance policy, for a period of up to 26 continuous weeks.

1.6.2  We will not pay
We will not pay:

a] for the loss of income of dependants;

b] for the first 30 days from the time you return to Australia; or

c] when the disablement preventing you from earning your income has not been continuous for more than 30 consecutive days from the date of your return to Australia.

Section 2.1  Cancellation Fees & Lost Deposits
If you think that you may have to cancel your journey or shorten your journey, you must tell us as soon as possible—for more information see under the headings Claims or call the contact number (or if overseas the 24 hour emergency assistance number) shown on the back cover of this PDS.
2.1.1 We will pay

If your journey is cancelled, rescheduled or shortened because of circumstances that were not expected or intended by you and are outside your control, then we will pay:

a] your cancellation fees and lost deposits on unused travel and accommodation arrangements that you have paid in advance and cannot recover in any other way, inclusive of:

» your travel agent’s cancellation fees and any commission or service fees retained by your travel agent up to the amount of commission or service fees that your travel agent would have earned had your journey not been cancelled, limited to:

» $1,500 for single and individual cover and under the Multi-Trip Plan;

» $1,500 per insured person for duo cover;

» $3,000 for family cover.

b] for the value of frequent flyer points, air miles, loyalty card points, redeemable vouchers or other similar schemes lost by you as a result of cancelling the services paid for with those points, air miles, vouchers or schemes, but only if you cannot recover your loss in any other way. We calculate the amount we pay you as follows:

i. for frequent flyer points, air miles or loyalty card points:

» the cost of an equivalent booking based on the same advance booking period as your original booking less any payment you made toward the booking, multiplied by

» the total number of points or air miles lost, divided by the total number of points or air miles used to make the booking.

ii. for vouchers, the face value of the voucher or current market value of an equivalent booking, whichever is the lesser.

c] your reasonable costs of rescheduling your journey.

The most we will pay for rescheduling your journey is the cost of cancellation fees and lost deposits that would have been payable under sub-sections 2.1.1 a] and b] had your journey been cancelled. We will not pay a claim under sub-section 2.1.1 c] in addition to a claim under sub-sections 2.1.1 a] and b] for the same services/facilities.

d] If, as a result of a pre-existing medical condition, a relative of yours dies or is hospitalised in Australia or New Zealand after the policy is issued, and at the time of policy issue you were unaware of the likelihood of such hospitalisation or death, then the most we will pay for all claims under sub-sections 2.1.1 a] and b] or 2.1.1 c] is:

» $2,000 for single and individual cover and under the Multi-Trip Plan;

» $2,000 per insured person for duo cover;

» $4,000 for family cover.

2.1.2 We will not pay

We will not pay your claim if:

a] you were aware, or a reasonable person in your circumstances would have been aware before your policy was issued, of any reason that may cause your journey to be cancelled, rescheduled or shortened;

b] caused by the death, injury or illness of any person, including a relative or travelling companion, not listed on your Certificate of Insurance who resides outside of Australia or New Zealand or who is aged 85 years and over;

c] the death, injury or illness of your relative arises from a pre-existing medical condition except as specified under sub-section 2.1.1 e];

d] caused by you or your travelling companion changing plans, or by the breakdown or dissolution of any personal or family relationship;

e] caused by any business, financial or contractual obligations. This exclusion does not apply to claims where:

i. you or your travelling companion are made redundant in Australia except where a reasonable person in a similar situation would have been aware before the policy was purchased that the redundancy was to occur; or
ii. you are a member of the **Defence Reserve** and the **Australian Defence Force** requires you to engage in full-time service, either for posting **overseas** or within Australia for internal security, provided the period of full-time service is greater than 30 days.

f] a tour operator or wholesaler is unable to complete arrangements for any tour because there were not enough people to go on the tour. This exclusion does not apply to prepaid travel arrangements bought separately to reach the departure point for the tour or for other travel arrangements;

g] caused by delays or rescheduling by a bus line, airline, shipping line or rail authority;

h] caused by the financial collapse or **insolvency** of any travel agent, transport, tour or accommodation provider;

i] caused by the mechanical breakdown of any means of transport;

j] caused by an act or threat of terrorism; or

k] you are a full-time permanent employee and **your** pre-arranged leave is cancelled by **your** employer unless you are a full-time member of the **Australian Defence Force** or of federal, state or territory emergency services, or a member of the **Defence Reserve**.

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Section 2.2 Travel Services Provider Insolvency

2.2.1 We will pay

If **your journey** is cancelled, shortened or rescheduled due to the **insolvency** of a **travel services provider**, then **we** will pay:

a] **your** cancellation fees and lost deposits on unused travel and accommodation arrangements that **you** have paid in advance and cannot recover in any other way, inclusive of:

   » **your** travel agent’s cancellation fees and any commission or service fees retained by **your** travel agent up to the amount of commission or service fees that **your** travel agent would have earned had **your journey** not been cancelled, limited to:

      » $1,500 for **single** and **individual** cover and under the Multi-Trip Plan;
      » $1,500 per **insured person** for **duo** cover;
      » $3,000 for **family** cover.

b] for the value of frequent flyer points, air miles, loyalty card points, redeemable vouchers or other similar schemes lost by **you** as a result of cancelling the services paid for with those points, air miles, vouchers or schemes, but only if **you** cannot recover **your** loss in any other way. **We** calculate the amount **we** pay **you** as follows:

   i. for frequent flyer points, air miles or loyalty card points:

      » the cost of an equivalent booking based on the same advance booking period as **your** original booking less any payment **you** made toward the booking,

      multiplied by

      » the total number of points or air miles lost,

      divided by the total number of points or air miles used to make the booking.

   ii. for vouchers, the face value of the voucher or current market value of an equivalent booking, whichever is the lesser.

   c] **your reasonable** costs of rescheduling **your journey**. **The most** **we** will pay for rescheduling **your journey** is the cost of cancellation fees or lost deposits that would have been payable under **sub-sections 2.2.1 a]** and **b]** had **your journey** been cancelled. **We** will not pay a claim under **sub-section 2.2.1 c]** in addition to a claim under **sub-sections 2.2.1 a]** and **b]** for the same services/facilities.

   d] the **reasonable** additional accommodation and travel expenses incurred if **you** have to return **home**.

2.2.2 We will not pay

**We** will not pay:

a] for any bookings for travel and accommodation not made before the start of **your journey** while **you** are still in Australia;

b] if **your journey** is cancelled, shortened or rescheduled at any time due to the **insolvency** of any travel agent, tour wholesaler, tour operator or booking agent;

c] if at the time **your policy** was issued, the **travel services provider** was **insolvent** or a **reasonable** person would have reason to expect the **travel services provider** might become **insolvent**; or

d] any accommodation expenses incurred after the date **you** originally planned to return to Australia.
Section 3.1 Additional Expenses

3.1.1 We will pay

a] We will reimburse any reasonable additional accommodation and travel expenses if you cannot travel because of an injury or sickness which needs immediate treatment from a medical adviser who certifies in writing that you are unfit to travel.

b] We will also reimburse your reasonable additional accommodation and travel expenses for you to be with your travelling companion if he or she cannot continue their journey for the same reason.

c] We will also reimburse the reasonable accommodation and travel expenses of your travelling companion or a relative to travel to you, stay near you or escort you, if you are in hospital suffering from a life threatening or other serious condition, or are evacuated for medical reasons. He or she must travel, stay with you or escort you on the written advice of a medical adviser and with the prior approval of Allianz Global Assistance.

d] If you shorten your journey and return to Australia on the written advice of a medical adviser approved by Allianz Global Assistance, we will reimburse the reasonable additional cost of your return to Australia. We will only pay the cost of the fare class that you had planned to travel at and you must take advantage of any pre-arranged return travel to Australia.

e] If, during your journey, your travelling companion or a relative of yours:  
   » dies unexpectedly;
   » is injured and because of the injury requires hospitalisation; or
   » becomes seriously sick and requires hospitalisation (except where the relevant death, injury or sickness arises out of a pre-existing medical condition), we will reimburse the reasonable additional cost of your early return to Australia. We will only pay the cost of the fare class you had planned to travel at.

f] We will reimburse you for airfares for you to return to the place you were when your journey was interrupted, if you return to your home because:
   » during your journey, a relative of yours dies unexpectedly or is hospitalised in Australia or New Zealand following a serious injury or a sickness (except arising from a pre-existing medical condition); and
   » it is possible for your journey to be resumed; and
   » there is more than 14 days remaining of the period of cover, as noted on your Certificate of Insurance; and
   » you resume your journey within 12 months of your return to Australia.

The most we will pay under this benefit is as follows:
   » $3,000 for single and individual cover and under the Multi-Trip Plan;
   » $3,000 per insured person for duo cover;
   » $6,000 for family cover.

g] If, as a result of a pre-existing medical condition, a relative of yours dies or is hospitalised in Australia or New Zealand after the policy is issued, and at the time of policy issue you were unaware of the likelihood of such hospitalisation or death, we will pay for the reasonable additional cost of your return to Australia and/or the cost of airfares for you to return to the place you were when your journey was interrupted.

The most we will pay for all events under this benefit is as follows:
   » $2,000 for single and individual cover and under the Multi-Trip Plan;
   » $2,000 per insured person for duo cover;
   » $4,000 for family cover.

h] In addition, we will reimburse your reasonable additional travel and accommodation expenses if a disruption to your journey arises from any of the following reasons:
   » your scheduled or connecting transport is cancelled, delayed, rescheduled or diverted because of a strike, riot, hijack, civil protest, weather, natural disaster or accident affecting your mode of transport;
   » you unknowingly break any quarantine rule;
   » you lose your passport, travel documents or transaction cards or they are stolen; or
   » your home is rendered uninhabitable by fire, explosion, earthquake or flood.

If you do not have a return ticket booked to Australia before you were injured or became sick, we will reduce the amount of your claim by the price of the fare to Australia from the place you planned to return to Australia from. The fare will be at the same fare class as the one you left Australia on.
Whenever claims are made by you under this section and Section 2.1 Cancellation Fees & Lost Deposits for cancelled services/facilities or alternative arrangements for the same or similar services/facilities, we will pay for the higher of the two amounts, not both.

3.1.2 We will not pay
We will not pay your claim:

a] if you were aware of any reason, before your period of cover commenced, that may cause your journey to be cancelled, disrupted or delayed;

b] if the death, injury or illness of your relative arises from a pre-existing medical condition, except as specified under sub-section 3.1.1 e];

c] if you can claim your additional travel and accommodation expenses from anyone else;

d] if your claim relates to the financial collapse or insolvency of any travel agent, tour wholesaler, tour operator or booking agent;

e] for cancellations, delays, rescheduling or diversions to your scheduled or connecting transport unless it is due to a strike, riot, hijack, civil protest, weather, natural disaster or accident affecting your mode of transport;

f] if you operate a rental vehicle in violation of the rental agreement; or

g] as a result of you or your travelling companion changing plans, or by the breakdown or dissolution of any personal or family relationship.

Section 3.2 Travel Delay Expenses

3.2.1 We will pay
We will reimburse the cost of your reasonable additional meals and accommodation expenses if a delay to your journey, for at least 6 hours, arises from circumstances outside your control.

We will pay up to $200 at the end of the initial 6 hour period. In addition, we will pay up to $200 for each full 24 hour period that the delay continues beyond the initial 6 hour delay.

3.2.2 We will not pay
We will not pay if a delay to your journey arises from any of the following reasons:

a] the financial collapse or insolvency of any travel agent, tour wholesaler, tour operator or booking agent; or

b] an act or threat of terrorism.

Nor will we pay if:

c] you can claim your additional meals and accommodation expenses from anyone else.

Section 3.3 Alternative Transport Expenses

3.3.1 We will pay
We will pay your reasonable additional travel expenses to reach a wedding, funeral, conference, sporting event or prepaid travel/tour arrangements on time if your scheduled transport is cancelled, delayed, shortened or diverted and that means you would not arrive on time.

3.3.2 We will not pay
We will not pay:

a] if the cancellation, delay, shortening or diversion of your scheduled transport arises from the financial collapse or insolvency of any travel agent, tour wholesaler, tour operator or booking agent; or

b] if your claim arises from an act or threat of terrorism.

Section 3.4 Return Airfare

3.4.1 We will pay
We will pay the cost of your original airline ticket (less any refund that is due to you) if, because of an injury or sickness that happens during your journey, the attending medical adviser, approved by us, requires you to be brought back to Australia with a medical escort. However, we will only do so if we bring you back when either:

» there are more than 5 days of the journey, or 25% of its length, whichever is the greater, left to go; or

» you have been confined to hospital overseas for more than 25% of the journey.
3.4.2 We will not pay
We will not pay if:

a] the injury or illness occurred before your departure from Australia.

b] the injury or illness was a pre-existing medical condition except as specified under the Pre-existing medical conditions section or in your Medical Terms of Cover letter; or

c] you have an entitlement to be paid for the cost of your original airline ticket (less any refunds due to you) under Section 2.1 Cancellation Fees & Lost Deposits.

Section 3.5 Domestic Services
3.5.1 We will pay
We will pay if you are injured during your journey and become disabled as a result of the injury and the disablement continues after your return to Australia. We will reimburse you up to $50 per day in respect of expenses incurred in the provision of housekeeping services that you are unable to perform yourself.

3.5.2 We will not pay
We will not pay if you do not have a medical certificate confirming your disablement and verifying the need for housekeeping services while disabled.

Section 3.6 Domestic Pets
3.6.1 We will pay
a] We will reimburse you up to $25 for each 24 hour period in respect of additional boarding kennel or boarding cattery fees for domestic dogs and cats owned by you if you are delayed beyond your original return date due to an event covered under this policy.

b] We will reimburse you up to $500 if your pet suffers an injury during your journey and requires veterinary treatment, provided that at the time of the injury, your pet was in the care of a relative, friend, boarding kennel or boarding cattery.

3.6.2 We will not pay
We will not pay any boarding kennel, boarding cattery or veterinary fees incurred outside of Australia.

Section 3.7 Hijack & Kidnap
3.7.1 We will pay
We will pay you $1,000 for each full 24 hour period that you are held captive if you are hijacked or kidnapped during your journey.

Section 4.1 Luggage & Personal Effects
4.1.1 We will pay
a] If, during your journey, your luggage and personal effects are stolen, accidentally damaged or are permanently lost (except when: left in a motor vehicle; is sporting equipment in use; or are valuables checked in to be transported in the cargo hold of any aircraft, ship, train, tram or bus) we will pay the lesser of:

» the repair cost;
» the replacement cost;
» the amount it would cost us to repair or replace the item(s) allowing for any trade discounts we are entitled to;
» the original purchase price; or
» the depreciated value after allowing for age, wear and tear.

We have the option to repair or replace the luggage and personal effects instead of paying you.

The maximum amount we will pay for any item (i.e. the item limit) is:

» $3,000 for personal computers, video recorders or cameras;
» $1,000 for mobile phones (including PDAs and any items with phone capabilities); or
» $750 for all other items.

A pair or related set of items, for example (but not limited to):

» a camera, lenses (attached or not), tripod and accessories;
» a matched or unmatched set of golf clubs, golf bag and buggy; or
» a matching pair of earrings,
are considered as only one item for the purpose of this insurance, and the appropriate single item limit will be applied.
No cover is provided under sub-sections 4.1.1 a[ for any item(s) of the particular item type for which you have purchased cover under Additional option - Increased item limits. Cover is then provided for any item(s) of the particular item type under sub-section 4.1.1 b].

b] If you purchase optional cover for increased item limits and any item(s) of the particular item type are, during the journey, stolen or accidentally damaged or are permanently lost, we will pay up to the increased limit selected by you and shown on your Certificate of Insurance for any one item or for all items of the nominated item type combined.

c] Luggage and personal effects left in a motor vehicle are only covered during daylight hours and must have been left in a concealed storage compartment of a locked motor vehicle, and forced entry must have been made. The most we will pay is $200 for each item, and $2,000 in total for all stolen items.

d] No cover is provided for valuables left in a motor vehicle at any time or valuables checked in to be transported in the cargo hold of any aircraft, ship, train, tram or bus including any loss from the point of check in until collection by you from the baggage carousel or collection area at the end of your flight, voyage or trip.

e] No cover is provided for the loss or damage to, or of, sporting equipment while in use (including surfboards).

Please note that sub-section 4.1.1 c] applies to all luggage and personal effects even if you have purchased the Additional option - Increased item limits.

The maximum amount we will pay for all claims combined under sub-section 4.1.1 a] is shown under the Table of benefits for the Plan you have selected.

The maximum amount we will pay for all claims combined under sub-section 4.1.1 c] is shown on your Certificate of Insurance.

4.1.2 We will not pay
To the extent permitted by law, we will not pay a claim in relation to your luggage and personal effects if:

a] you do not report the loss, theft or misplacement within 24 hours to the police or an office of the bus line, airline, shipping line or rail authority you were travelling on when the loss, theft or misplacement occurred. You must prove that you made such report by providing us with a written statement from whoever you reported it to;

b] the loss, theft or damage is to, or of, items left behind in any hotel or motel room after you have checked out, or items left behind in any aircraft, ship, train, tram, taxi or bus;

c] the luggage and personal effects were being sent unaccompanied by you or under a freight contract;

d] the loss or damage arises from any process of cleaning, repair or alteration;

e] the loss or damage arises from ordinary wear and tear, deterioration, atmospheric or weather conditions, insects, rodents or vermin;

f] the luggage and personal effects were left unsupervised in a public place;

g] the luggage and personal effects have an electrical or mechanical breakdown;

h] the luggage and personal effects are fragile, brittle or an electronic component is broken or scratched - unless either:

» it is the lens of spectacles, binoculars or photographic or video equipment; or

» the breakage or scratch was caused by a crash involving a vehicle in which you are travelling;

i] you are entitled to be reimbursed by the bus line, airline, shipping line or rail authority you were travelling on when the loss, theft, misplacement or damage occurred. However, if you are not reimbursed the full amount of your claim, we will pay the difference between the amount of your loss and what you were reimbursed, up to the limit of your cover (allowing for depreciation due to age, wear and tear).

Section 4.2 Luggage & Personal Effects Delay Expenses

4.2.1 We will pay
We will reimburse you if any items of your luggage and personal effects are delayed, misdirected or misplaced by the carrier for more than 12 hours, and in our opinion it was necessary for you to purchase essential items of clothing or other personal items.

You must provide written proof from the carrier who was responsible for your luggage and personal effects that they were delayed, misdirected or misplaced.

We will deduct any amount we pay you under this Section for any subsequent claim for lost luggage and personal effects (Section 4.1).
4.2.2 We will not pay

We will not pay if you are entitled to compensation from the bus line, air line, shipping line or rail authority you were travelling on for the relevant amount claimed. However, if you are not reimbursed the full amount, we will pay the difference between the amount of your expenses and what you were reimbursed, up to the limit of your cover.

Section 4.3 Travel Documents, Transaction Cards & Travellers Cheques

4.3.1 We will pay

a] If any essential travel documents (including passports), transaction cards or travellers cheques are lost by you, stolen from you or destroyed during your journey, then we will pay the issuer’s fees for the replacement costs (including communication costs) of the items lost, stolen or destroyed.

b] If during your journey, your transaction cards or travellers cheques are lost or stolen, then we will pay for any loss resulting from the fraudulent use of the transaction cards or travellers cheques.

4.3.2 We will not pay

a] To the extent permitted by law, we will not pay if you do not report the loss or theft within 24 hours to the police and, in the case of transaction cards or travellers cheques, to the issuing bank or company in accordance with the conditions under which the transaction cards or travellers cheques were issued. You must prove that you made such report by providing us with a written statement from whoever you reported it to.

b] We will not pay if the cash, bank notes, currency notes, postal orders or money orders were not on your person at the time they were stolen.

Section 4.4 Theft of Cash

4.4.1 We will pay

We will pay for cash, bank notes, currency notes, postal orders or money orders stolen from your person during your journey.

4.4.2 We will not pay

a] To the extent permitted by law, we will not pay if you do not report the theft within 24 hours to the police or an office of the bus line, airline, shipping line or rail authority you were travelling on when the theft occurred. You must prove that you made a report by providing us with a written statement from whoever you reported it to.

b] We will not pay if the cash, bank notes, currency notes, postal orders or money orders were not on your person at the time they were stolen.

Section 5.1 Rental Vehicle Insurance Excess

What you are covered for

Cover is only provided under this section if you have purchased motor vehicle insurance or damage waiver from the rental company or agency you rented the rental vehicle from. This insurance does not cover items such as, but not limited to, tyres and/or windscreens if they are not covered by the motor vehicle insurance or damage waiver purchased from the rental company or agency.

This section only provides cover for the excess payable under the motor vehicle insurance or the liability fee payable under the damage waiver specified in your rental agreement up to the limit shown in the Table of benefits under the Plan you have selected.

5.1.1 We will pay

a] If, during your period of cover, a rental vehicle you have rented from a rental company or agency is:
   » involved in a motor vehicle accident while you are driving it; or
   » damaged or stolen while in your custody, then we will pay the lesser of:
      » the motor vehicle insurance excess or the liability fee you are required to pay under a damage waiver; or
      » property damage for which you are liable.

You must provide a copy of:
   » your rental vehicle agreement;
   » an incident report that was completed;
   » repair account;
» an itemised list of the value of the damage; and
» written notice from the rental company or agency advising that you are liable to pay the excess or liability fee.

b] If your attending medical adviser certifies in writing that you are unfit to return your rental vehicle to the nearest depot during your journey, then we will pay up to $500 for the cost of returning your rental vehicle.

We will also pay up to the limits shown in your Certificate of Insurance for any additional cover purchased under the Additional option - Increased rental vehicle insurance excess cover, if available to you.

5.1.2 We will not pay
We will not pay a claim involving the theft or damage to your rental vehicle if the claim arises directly or indirectly from, or is in any way connected with, or is for:

a] you using the rental vehicle in breach of the rental agreement;
b] you using the rental vehicle without a licence for the purpose that you were using it; or
c] administrative charges or fees of the rental company that are not a component of a motor vehicle insurance excess or liability fee.

Section 6.1 Personal Liability

6.1.1 We will pay
If you become legally liable to pay compensation for:

» death or bodily injury to someone else; or
» physical loss of, or damage to, someone else's property

as a result of an accident, or a series of accidents arising out of the one event, that happens during your journey, then we will cover you for:

» the compensation (including legal costs) awarded against you; and

» any reasonable legal costs incurred by you for settling or defending a claim made against you, providing you have approval in writing from Allianz Global Assistance before incurring these costs.

We must be told as soon as you or your personal representatives are aware of a possible prosecution, inquest, fatal injury, accident or incident which might lead to a claim against you.

You must not pay or promise to pay, settle with, admit or deny liability to anyone who makes a claim against you without our written consent.

6.1.2 We will not pay
We will not pay any amount you become legally liable to pay if the liability arises directly or indirectly from, or is in any way connected with, or is for:

a] bodily injury to you, your travelling companion or to a relative or employee of any of you;
b] loss of or damage to property belonging to, or in the care, custody or control of you, your travelling companion, a relative or an employee of any of you;
c] your ownership, custody, control or use of any firearm or weapon, aerial device, watercraft or motorised vehicle;
d] your conduct of, or employment in any business, profession, trade or occupation;
e] any loss, damage or expenses which are covered or should have been covered under a statutory or compulsory insurance policy, statutory or compulsory insurance or compensation scheme or fund, or under Workers Compensation legislation, an industrial award or agreement, or Accident Compensation legislation;
f] any fine or penalty, or aggravated, punitive, exemplary or liquidated damages;
g] illness, sickness or disease that is transmitted by you;
h] any relief or recovery other than monetary amounts;
i] a contract that imposes on you a liability which you would not otherwise have;
j] assault and/or battery committed by you or at your direction;
k] any act intended to cause bodily injury, property damage or liability done by you or any person acting with your knowledge, connivance or consent;
l] your participation in snow sport activities.

Section 7.1 Emergency Rescue
You only have this cover if you purchased the Snow pack. See Additional options section for details.

7.1.1 Allianz Global Assistance will arrange
Allianz Global Assistance will arrange for the following assistance services if you injure yourself, or become sick while participating in snow sport activities during your journey:
a] access to a medical adviser for emergency medical treatment while overseas;

b] any messages which need to be passed on to your family or employer in the case of an emergency;

c] provision of any written guarantees for payment of reasonable expenses for emergency hospitalisation while overseas;

d] your medical transfer or evacuation if you must be transported to the nearest hospital for emergency medical treatment overseas or be brought back to Australia with appropriate medical supervision; and

e] the return to Australia of your dependants if they are left without supervision following your hospitalisation or evacuation.

In addition:

f] If you die as a result of an injury or a sickness during your journey, we will pay for your reasonable funeral expenses incurred overseas or the cost of bringing your remains back to your home. The maximum amount we will pay is $15,000 per person.

Please note that we will not pay for any costs incurred in Australia except the reasonable cost of transporting your remains from the inbound port or airport to your home or nominated funeral home.

7.1.2 We will not pay

We will not pay:

a] for any expenses for medical evacuation, funeral expenses incurred overseas or bringing your remains back to Australia, unless it has been first approved by Allianz Global Assistance;

b] if you decline to promptly follow the medical advice we have obtained, and we will not be responsible for subsequent medical, hospital or evacuation expenses;

c] for medical evacuation or the transportation of your remains from Australia to an overseas country;

d] for any claims arising from the following: ice skating, off-piste or backcountry activities, bobsleighing, snow rafting, para-penting, heli-skiing, ski acrobatics, ski or snowboard jumping, aerial skiing, stunting, freestyle, ski joring or any form of power-assisted skiing or use of mechanised snowmobiles except as provided by the recognised piste authorities for transport to and from areas designed for recreational skiing; or

e] for any claims arising outside the period 15th December to 31st March in Northern Hemisphere resorts, and 15th June to 30th September in Southern Hemisphere resorts. This exclusion will not apply to those resorts which are open outside these time periods and have sufficient snow for normal skiing activities.

Section 7.2 Own Snow Sport Equipment

You only have this cover if you purchased the Snow pack. See Additional options section for details.

7.2.1 We will pay

a] If, during your journey, your snow sport equipment is stolen, accidentally damaged or is permanently lost (except when left in a motor vehicle or while in use), we will pay the lesser of:

» the repair cost;

» the replacement cost;

» the amount it would cost us to repair or replace the item(s) allowing for any trade discounts we are entitled to;

» the cost of repairing or replacing the lost or damaged part of a pair, set or collection; or

» the original purchase price.

We have the option to repair or replace the snow sport equipment instead of paying you.

A pair or set of items, for example (but not limited to):

» a matched or unmatched set of skis or ski poles are considered as only one item and the appropriate benefit limit will be applied.

b] Snow sport equipment owned by you and left in a motor vehicle is only covered during daylight hours and must have been left in a concealed storage compartment of a locked motor vehicle, and forced entry must have been made. The most we will pay is $200 for each item, and $1,000 in total for all stolen items.

c] No cover is provided for snow sport equipment while it is in use.
7.2.2 We will not pay
To the extent permitted by law, we will not pay a claim in relation to snow sport equipment owned by you if:

a] you do not report the loss, theft or damage within 24 hours to the police or an office of the bus line, airline, shipping line or rail authority you were travelling on when the loss, theft or damage occurred. You must prove that you made such report by providing us with a written statement from whoever you reported it to;

b] the loss, theft or damage is to, or of, snow sport equipment left behind in any hotel or motel room after you have checked out, or snow sport equipment left behind in any aircraft, ship, train, tram, taxi or bus;

c] the snow sport equipment was being sent unaccompanied by you or under a freight contract;

d] the loss or damage arises from any process of cleaning, repair or alteration;

e] the loss or damage arises from ordinary wear and tear, deterioration, atmospheric or weather conditions, insects, rodents or vermin;

f] the snow sport equipment was left unsupervised in a public place;

g] you are entitled to be reimbursed by the bus line, airline, shipping line or rail authority you were travelling on when the loss, theft or damage occurred. However, if you are not reimbursed the full amount of your claim, we will pay the difference between the amount of your loss and what you were reimbursed, up to the limit of your cover;

h] the claim arises from the following: ice skating, off-piste or backcountry activities, bobsleiging, snow rafting, para-penting, heli-skiing, ski acrobatics, ski or snowboard jumping, aerial skiing, stunting, freestyle, ski joring or any form of power-assisted skiing or use of mechanised snow-mobiles except as provided by the recognised piste authorities for transport to and from areas designed for recreational skiing.

Section 7.3 Snow Sport Equipment Hire
You only have this cover if you purchased the Snow pack. See the Additional options section for details.

7.3.1 We will pay
We will pay for the costs of hiring alternative snow sport equipment following:

a] accidental loss, theft of, or damage to, your snow sport equipment for which a claim has been accepted by us under Section 7.2 Own Snow Sport Equipment; or

b] the misdirection or delay, for a period more than 24 hours, of snow sport equipment owned by you.

We will also reimburse the snow sport equipment hire insurance excess if you have chosen and paid for snow sport equipment hire cover from the hire company or agency and you are charged an excess following the loss of, or damage to the snow sport equipment hired by you.

Section 7.4 Snow Sport Pack
You only have this cover if you purchased the Snow pack. See the Additional options section for details.

7.4.1 We will pay
If, as a result of your injury or sickness during your journey, you are unable to utilise the full duration of your pre-booked and pre-paid ski passes, snow sport equipment hire, tuition fees or lift passes, we will reimburse you the irrecoverable cost of the unused portion for each insured person.

You must obtain a medical certificate from your treating medical adviser in support of your claim for your injury or sickness.

7.4.2 We will not pay
We will not pay:

a] for any claims arising from the following: ice skating, off-piste or backcountry activities, bobsleiging, snow rafting, para-penting, heli-skiing, ski acrobatics, ski or snowboard jumping, aerial skiing, stunting, freestyle, ski joring or any form of power-assisted skiing or use of mechanised snow-mobiles except as provided by the recognised piste authorities for transport to and from areas designed for recreational skiing; or
b] for any claims arising outside the period 15th December to 31st March in Northern Hemisphere resorts and 15th June to 30th September in Southern Hemisphere resorts. This exclusion will not apply to those resorts which are open outside these time periods and have sufficient snow for normal skiing activities.

Section 7.5 Piste Closure
You only have this cover if you purchased the Snow pack. See the Additional options section for details.

7.5.1 We will pay
We will pay up to $100 per 24 hour period for either:
  » the cost of transport to the nearest resort; or
  » the cost of additional ski passes,
if, as a result of not enough snow, bad weather or power failure during your journey, all lift systems in your pre-booked holiday resort are closed for more than 24 hours.

7.5.2 We will not pay
We will not pay:
a] for any claims relating to resorts that do not have skiing facilities greater than 1,000 metres above sea level; or
b] for any claims arising outside the period 15th December to 31st March in Northern Hemisphere resorts and 15th June to 30th September in Southern Hemisphere resorts. This exclusion will not apply to those resorts which are open outside these time periods and have sufficient snow for normal skiing activities.

Section 7.6 Bad Weather & Avalanche Closure
You only have this cover if you purchased the Snow pack. See the Additional options section for details.

7.6.1 We will pay
We will pay the reasonable extra travel and accommodation expenses that you need to pay if your pre-booked outward or return journey is delayed for more than 12 hours from your scheduled departure time because of an avalanche or bad weather.

7.6.2 We will not pay
To the extent permissible by law, we will not pay:
a] unless you obtain a written statement from the appropriate authority confirming that the reason for the delay was related to either an avalanche or bad weather, and how long it lasted.

Nor will we pay:
b] for any claims relating to resorts that do not have skiing facilities greater than 1,000 metres above sea level; or
c] for any claims arising outside the period 15th December to 31st March in Northern Hemisphere resorts and 15th June to 30th September in Southern Hemisphere resorts. This exclusion will not apply to those resorts which are open outside these time periods and have sufficient snow for normal skiing activities.

Section 7.7 Own Golf Equipment
You only have this cover if you purchased the Golf pack. See the Additional options section for details.

7.7.1 We will pay
a] If, during your journey, your golf equipment is stolen, accidentally damaged or is permanently lost (except when left in a motor vehicle or while in use), we will pay the lesser of:
  » the repair cost;
  » the replacement cost;
  » the amount it would cost us to repair or replace the item(s) allowing for any trade discounts we are entitled to;
  » the cost of repairing or replacing the lost or damaged part of a pair, set or collection; or
  » the original purchase price.
We have the option to repair or replace the golf equipment instead of paying you.

A pair or set of items, for example (but not limited to):
  » matched or unmatched set of golf clubs, golf bag and buggy
are considered as only one item and the appropriate benefit limit will be applied.
b] Golf equipment owned by you and left in a motor vehicle is only covered during daylight hours and must have been left in a concealed storage compartment of a locked motor vehicle, and forced entry must have been made. The most we will pay is $200 for each item, and $1,000 in total for all stolen items.

c] No cover is provided for golf equipment while it is in use.

7.7.2 We will not pay
To the extent permitted by law, we will not pay a claim in relation to golf equipment owned by you if:

a] you do not report the loss, theft or damage within 24 hours to the police or an office of the bus line, airline, shipping line or rail authority you were travelling on when the loss, theft or damage occurred. You must prove that you made such report by providing us with a written statement from whoever you reported it to;

b] the loss, theft or damage to, or of, golf equipment left behind in any hotel or motel room after you have checked out, or golf equipment left behind in any aircraft, ship, train, tram, taxi or bus;

c] the golf equipment was being sent unaccompanied by you or under a freight contract;

d] the loss or damage arises from any process of cleaning, repair or alteration;

e] the loss or damage arises from ordinary wear and tear, deterioration, atmospheric or weather conditions, insects, rodents or vermin;

f] the golf equipment was left unsupervised in a public place; or

g] you are entitled to be reimbursed by the bus line, airline, shipping line or rail authority you were travelling on when the loss, theft or damage occurred. However, if you are not reimbursed the full amount of your claim, we will pay the difference between the amount of your loss and what you were reimbursed, up to the limit of your cover.

Section 7.8 Golf Equipment Hire
You only have this cover if you purchased the Golf pack. See the Additional options section for details.

7.8.1 We will pay
We will reimburse you for the costs of hiring alternative golf equipment following:

a] accidental loss, theft of, or damage to, golf equipment owned by you, for which a claim has been accepted by us under Section 7.7 Own Golf Equipment; or

b] the misdirection or delay, for a period of more than 24 hours, of golf equipment owned by you.

We will also reimburse the golf equipment hire insurance excess if you have chosen and paid for golf equipment hire cover from the hire company or agency and you are charged an excess following the loss of, or damage to the golf equipment hired by you.

Section 7.9 Golf Green Fees
You only have this cover if you purchased the Golf pack. See the Additional options section for details.

7.9.1 We will pay
We will pay the value of any non-refundable, pre-paid green fees which are not used due to you being injured or becoming sick during your journey, if you have provided us with written confirmation from a medical adviser approved by Allianz Global Assistance confirming your inability to play golf.

Section 7.10 Hole in One
You only have this cover if you purchased the Golf pack. See the Additional options section for details.

7.10.1 We will pay
We will pay you $250 if you complete a hole in one by driving from the tee and holing out in a single stroke during an organised game involving two or more players, at any 18 hole golf course with a course par score of 65 or above. You must provide us with a copy of your score card signed by you and your golfing partner(s) and countersigned by the club professional or secretary.

Section 7.11 Medical Cover while Cruising
You only have this cover if you purchased the Cruise pack. See the Additional options section for details.

7.11.1 We will pay
a] We will reimburse the reasonable medical or hospital expenses you incur until you get back to Australia if you injure yourself or become sick while on a cruise vessel. The medical or hospital expenses must have been incurred on the written advice of a medical adviser approved by Allianz Global Assistance. You must make every effort to keep your medical or hospital expenses to a minimum.
If we determine, on medical advice, that you should return home for treatment and you do not agree to do so, we will pay you an amount up to the limit shown in the Table of benefits, which we reasonably consider to be equivalent to:

- your medical expenses and/or related costs incurred overseas to the date we advise you to return to Australia; plus
- the amount it would cost us to return you to Australia; plus
- the amount of any cancellation fees and lost deposits you would have incurred had you followed our advice.

You will then be responsible for any ongoing or additional costs relating to or arising out of the event you have claimed for.

We will only pay for treatment received and/or hospital accommodation during the 12 month period after the sickness first showed itself or the injury happened.

b] We will also pay the cost of emergency dental treatment up to the limit shown in the Table of benefits for the Plan selected for dental costs incurred which the treating dentist certifies in writing is for the relief of sudden and acute pain to sound and natural teeth. This limit does not apply to dental costs arising from any injury that is covered under sub-section 7.11.1 a].

7.11.2 We will not pay

To the extent permitted by law, we will not pay for expenses:

- a] when you have not notified Allianz Global Assistance as soon as practicable of your admittance to hospital;
- b] incurred after 2 weeks treatment by a chiropractor, physiotherapist or dentist unless approved by Allianz Global Assistance;
- c] if you do not follow the advice of Allianz Global Assistance;
- d] for damage to dentures, dental prostheses, bridges or crowns;
- e] for expenses relating to dental treatment involving the use of precious metals or for cosmetic dentistry;
- f] for dental treatment caused by or related to the deterioration and/or decay of teeth; or
- g] for preventative dental treatment.

Section 7.12 Evacuation Cover - Ship to Shore

You only have this cover if you purchased the Cruise pack. See the Additional options section for details.

7.12.1 Allianz Global Assistance will arrange

Allianz Global Assistance will arrange for the following assistance services if you injure yourself, or become sick while travelling on a cruise vessel:

- a] access to a medical adviser for emergency medical treatment;
- b] any messages which need to be passed on to your family or employer in the case of an emergency;
- c] provision of any written guarantees for payment of reasonable expenses for emergency hospitalisation while on a cruise vessel;
- d] your medical transfer or evacuation if you must be transported to the nearest overseas hospital for emergency medical treatment or be brought back to Australia with appropriate medical supervision; and
- e] the return to Australia of your dependants if they are left without supervision following your hospitalisation or evacuation.

In addition:

- f] If you die as a result of an injury or a sickness during your travel on a cruise vessel, we will pay for your reasonable funeral expenses incurred overseas and/or of bringing your remains back to your home. The maximum we will pay is $15,000 per person. Please note that we will not pay for any costs incurred in Australia except the reasonable cost of transporting your remains from the inbound port or airport to your home or nominated funeral home.

7.12.2 We will not pay

To the extent permitted by law, we will not pay for expenses:

- a] for any expenses for medical evacuation, funeral expenses incurred overseas or bringing your remains back to Australia unless it has been first approved by Allianz Global Assistance;
- b] if you decline to promptly follow the medical advice we have obtained, and we will not be responsible for subsequent medical, hospital or evacuation expenses; or
- c] for medical evacuation or the transportation of your remains from Australia to an overseas country.
Section 7.13  Cabin Confinement
You only have this cover if you purchased the Cruise pack. See the Additional options section for details.

7.13.1  We will pay
We will pay you $50 for each period of 24 hours if, as a result of injury or sickness during your journey, you are confined to your cabin or the cruise vessel’s hospital.

Section 7.14  Pre-Paid Shore Excursion Cancellation
You only have this cover if you purchased the Cruise pack. See the Additional options section for details.

7.14.1  We will pay
We will pay for cancellation fees and lost deposits if you cannot participate in your pre-paid shore excursion(s) due to your confinement in your cabin or hospital bed in the cruise vessel’s hospital.

Section 7.15  Formal Cruise Attire Lost or Damaged
You only have this cover if you purchased the Cruise pack. See the Additional options section for details.

7.15.1  We will pay
If, during your journey, your formal wear is stolen, accidentally damaged or is permanently lost, we will pay the lesser of:

» the repair cost;
» the replacement cost;
» the amount it would cost us to repair or replace the item(s) allowing for any trade discounts we are entitled to;
» the cost of repairing or replacing the lost or damaged part of a pair, set or collection; or
» the original purchase price.

We have the option to repair or replace the formal wear instead of paying you.
A pair or set of items, for example (but not limited to):

» shoes, gloves, suit
are considered as only one item and the appropriate benefit limit will be applied.

7.15.2  We will not pay
To the extent permitted by law, we will not pay a claim in relation to your formal wear if:

a] you do not report the loss, theft or misplacement within 24 hours to the police or an office of the carrier you were travelling on when the loss, theft or misplacement occurred. You must prove that you made such report by providing us with a written statement from whoever you reported it to;
b] the loss, theft or damage is to, or of, formal wear left behind in any hotel or motel room after you have checked out or cruise vessel cabin after you have disembarked, or items left behind in any aircraft, ship, train, tram, taxi or bus;
c] the formal wear was being sent unaccompanied by you or under a freight contract;
d] the loss or damage arises from any process of cleaning, repair or alteration;
e] the loss or damage arises from ordinary wear and tear, deterioration, atmospheric or weather conditions, insects, rodents or vermin;
f] the formal wear was left unsupervised in a public place; or
g] you are entitled to be reimbursed by the bus line, airline, shipping line or rail authority you were travelling on when the loss, theft, misplacement or damage occurred. However, if you are not reimbursed the full amount of your claim, we will pay the difference between the amount of your loss and what you were reimbursed, up to the limit of your cover.

Section 7.16  Formal Cruise Attire Delayed
You only have this cover if you purchased the Cruise pack. See the Additional options section for details.

7.16.1  We will pay
We will reimburse you your reasonable expenses if your formal wear is delayed, misdirected or misplaced while on the outward portion of your journey for over 12 hours from the time you boarded the cruise vessel, and it is necessary to purchase or hire replacement formal wear.

7.16.2  We will not pay
We will not pay if you are entitled to compensation from the bus line, airline, shipping line or rail authority you were travelling on for the relevant amount claimed.
Claims

First check that you are covered by your policy by reading the appropriate section in the PDS and the General exclusions applicable to sections to see exactly what is, and is not covered, noting particularly any conditions, limitations and exclusions.

How to make a claim

You must give notice of your claim as soon as possible by completing a claim form and sending it to the address shown on the back cover of this PDS or by calling the contact number also shown on the back cover of this PDS. You can download a claim form from www.travelclaims.com.au.

If there is a delay in claim notification, or you do not provide sufficient detail for Allianz Global Assistance to consider your claim, we can reduce any claim payable by the amount of prejudice we have suffered because of the delay.

You must give any information Allianz Global Assistance reasonably asks for to support your claim at your expense, such as but not limited to police reports, valuations, medical reports, original receipts or proof of purchase and ownership. If required they may ask you to provide them with translations into English of any such documents to enable their assessment of your claim.

You must co-operate at all times in relation to providing supporting evidence and such other information that may reasonably be required.

a] If you think that you may have to cancel your journey or shorten your journey, you must tell us as soon as possible. Contact Allianz Global Assistance using the contact number, or if overseas the 24 hour emergency assistance number, shown on the back cover of this PDS.

b] For medical, hospital or dental claims, contact Allianz Global Assistance as soon as practicable.

c] For loss or theft of your luggage and personal effects, report it immediately to the police and obtain a written notice of your report.

d] For damage or misplacement of your luggage and personal effects, caused by the airline or any other operator or accommodation provider, report the damage or misplacement to an appropriate official and obtain a written report, including any offer of settlement that they may make.
Submit full details of any claim in writing within 30 days of your return home.

Claims are payable in Australian dollars to you

We will pay all claims in Australian dollars. We will pay you unless you tell us to pay someone else. The rate of currency exchange that will apply is the rate at the time you incurred the expense.

Payment will be made by direct credit to an Australian bank account nominated by you.

You must not admit fault or liability

You must not admit that you are at fault, for any accident, incident or event causing a claim under your policy, and you must not offer or promise to pay any money, or become involved in legal action, without the approval of Allianz Global Assistance.

You must help us to recover any money we have paid

If we have a claim against someone in relation to the money we have paid or we have paid under your policy, you must do everything you can to help us do that in legal proceedings. If you are aware of any third party that you or we may recover money from, you must inform us of such third party.

If you can claim from anyone else, we will only make up the difference

If you can make a claim against someone in relation to a loss or expense covered under this policy and they do not pay you the full amount of your claim, we will make up the difference. You must claim from them first.

Other insurance

If any loss, damage or liability covered under this policy is covered by another insurance policy, you must give us details. If you make a claim under one insurance policy and you are paid the full amount of your claim, you cannot make a claim under the other policy.

If you make a claim under another insurance policy and you are not paid the full amount of your claim, we will make up the difference, up to the amount this policy covers you for, provided your claim is covered by this policy. We may seek contribution to amounts we have paid, or must pay, from your other Insurer. You must give us any information we reasonably ask for to help us make a claim from your other Insurer.

Subrogation

We may, at our discretion undertake in your name and on your behalf, control and settlement of proceedings for our own benefit in your name to recover compensation or secure indemnity from any party in respect of anything covered by this policy.

You are to assist and permit to be done, everything required by us for the purpose of recovering compensation or securing indemnity from other parties to which we may become entitled or subrogated, upon us paying your claim under this policy regardless of whether we have yet paid your claim and whether or not the amount we pay you is less than full compensation for your loss. These rights exist regardless of whether your claim is paid under a non-indemnity or an indemnity clause of this policy.

Recovery

We will apply any money we recover from someone else under a right of subrogation in the following order:

1. to us, our costs (administration and legal) arising from the recovery.
2. to us, an amount equal to the amount that we paid to you under your policy.
3. to you, your uninsured loss (less your excess).
4. to you, your excess.

Once we pay your total loss we will keep all money left over.

If we have paid your total loss and you receive a payment from someone else for that loss or damage, you must pay us the amount of that payment up to the amount of the claim we paid you.

If we pay you for lost or damaged property and you later recover the property or it is replaced by a third party, you must pay us the amount of the claim we paid you.

Business travellers – how GST affects your claim

If you are entitled to claim an input tax credit in respect of a cost for which a claim is made, or would be entitled to an input tax credit if you were to incur the relevant cost (i.e. in replacing a lost or stolen item), the amount we would otherwise pay will be reduced by the amount of that input tax credit.
Travel within Australia only - GST

If you are entitled to claim an input tax credit in respect of your premium, you must inform us of the amount of that input tax credit (as a percentage) at the time you first make a claim. If you fail to do so, you may have a liability for GST if we pay you an amount under your policy.

Fraud

Insurance fraud places additional costs on honest policyholders. Fraudulent claims force insurance premiums to rise. We encourage the community to assist in the prevention of insurance fraud.

You can help by reporting insurance fraud by calling Allianz Global Assistance on 1800 453 937. All information will be treated as confidential and protected to the full extent under law.
This Financial Services Guide (FSG) is an important document which we are required to give to you under the requirements of our Australian Financial Services Licence (AFSL 313890).

The FSG serves several purposes:

- provides you with information about Defence Health to help you decide whether to use the financial services we provide;
- explains the services we can offer and who provides the services;
- explains how we are remunerated in relation to those services; and
- includes details of our internal and external complaints handling procedures and how you can access them.

Throughout this FSG, where we refer to ‘we’, ‘us’, ‘our’ or Defence Health’ we are referring to Defence Health Limited (ABN 80 008 629 481).

Who is Defence Health?

Defence Health is a registered not-for-profit private health insurer which has been serving the Defence community since 1953.

Defence Health’s AFSL authorises Defence Health to:

(a) provide general financial product advice in respect of selected life risk insurance products and general insurance products; and (b) arrange for you to apply for, acquire, vary or dispose of those financial products.
What products are available?

Defence Health can only advise on, arrange or deal in life and general insurance products that are selected from its approved product list. These products are underwritten and issued by life insurance and general insurance companies. The approved product list can be obtained on request. Defence Health does not provide financial services in relation to any other financial products.

Defence Health is not the issuer of these products.

What financial services do we offer?

General advice

Defence Health can provide you with general advice regarding any insurance product on the approved product list.

This means that we can provide you with information about the products and their key features as well as providing quotes. We can also tell you how you can apply for them and how you can obtain a Product Disclosure Statement (PDS). A PDS contains important information which you need in order to make an informed decision about the particular product. We can also assist you with the purchase of these products.

If you require personal financial product advice or broader financial planning services, you are encouraged to seek professional advice from an appropriately licensed financial services provider.

How do you do business with us?

Defence Health provides the financial services described in this FSG through its employee representatives. We are responsible for the conduct of our representatives when they provide financial services to you.

How are we paid for the services we provide?

General advice – commission only

Defence Health receives commission payments from the product issuers in the range of 10% to 20% of the premiums you pay to the insurer (excluding GST).

Our employee representatives receive salaries only. We do not pay our representatives any commission or bonuses calculated by reference to product sales.

Other than the premiums for the respective products, you pay no other charges or fees for the general advice provided by Defence Health.
Do we have any associations that influence us?

Defence Health does not have any ownership interests or other associations with any insurer on our approved product list that might influence the financial services we provide.

What compensation arrangements are in place?

Defence Health has adequate professional indemnity insurance to cover the activities of Defence Health, its staff and representatives with respect to the provision of financial product advice for the life insurance and general insurance products on our approved product list. This insurance complies with the requirements of the Corporations Act and Regulations.

How do we safeguard your private information?

The privacy of your personal information is important. We have systems and processes in place to protect your privacy. We need to collect personal information to administer our customer relationships and to provide appropriate advice. We may also need to disclose your personal information to the relevant product insurer if we assist you to put insurance in place.

For detailed information on how we handle your personal information, please read our Privacy Policy which you can download from www.defencehealth.com.au or request a copy from us by calling 1800 335 425.

What should you do if you have a complaint?

We have established procedures to ensure that all enquiries and complaints are properly considered and dealt with. If you have an enquiry or complaint about the operation or management of our services, please call our Complaints Manager on 1800 335 425 or write to our Complaints Manager at our address on the following page.

In the event that your complaint is not resolved to your satisfaction, you may refer it to the Financial Ombudsman Service (FOS). Please quote Defence Health's FOS number which is 12585.

Their contact details are:

**The Manager**
Financial Ombudsman Service
GPO Box 3
Melbourne VIC 3001

**T:** 1300 780 808  
**F:** 03 9613 6399  
**W:** www.fos.org.au  
**E:** info@fos.org.au
Contact Us

Phone
Phone 1800 335 425
Monday to Friday
8:30 am to 5:00 pm EST

Web
defencehealth.com.au

Email
info@defencehealth.com.au
claims@defencehealth.com.au

Fax
1300 665 096 (general)
1800 241 581 (claims)

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