This Policy is a contract made between the Insured Person and AIG Insurance Co. Ltd., the Company. The Company agrees to provide insurance on the basis set out in this Policy provided the premium is paid when due and the Company agrees to accept it. Any endorsement to the Policy or the insurance certificate shall form part of the Policy.

Signed for and on behalf of the Company

Accident & Health Manager
AIG Kenya Ins. Co Ltd

PERIOD OF INSURANCE

This Policy does not apply to events that occur after the expiration date shown on the insurance certificate, or if the Insured Person returns from his Insured Journey before this date, or on the date he returns to the Point of Departure. This Policy cannot be cancelled once an Insured Journey has commenced or after the expiry date of the Insured Journey.

For Annual Multi Trip Plans, cover will terminate on the Insured Person’s return to the Point of Departure and recommence on his next Insured Journey. The maximum period for any Insured Journey on an Annual Multi Trip Plan is restricted to 180 days. Except for Cancellation insurance, cover will commence when the Insured Person leaves the Point of Departure and will automatically cease when he returns to the Point of Departure unless otherwise agreed to by the Company in writing.

In the event of VISA delays, the client can amend their dates of travel to a maximum of two occasions, but not after 60 days from the effective date of the policy.

PREMIUM PAYMENTS

The Insured Person is liable for the premium and the premium is payable in advance and the Company shall not be liable for any claim arising under this Policy that occurs prior to receipt of the premium. The Company shall not be obliged to accept premium tendered to it or to any intermediary after such date, but may do so upon such terms as it in its sole discretion may determine.

The Company reserves the right to ask for proof of payment of premium at any time. Such proof must be to the Company’s satisfaction.

MAXIMUM AMOUNT PAYABLE

1. No Insured Person shall be entitled to recover a benefit exceeding 100% of the sum for an Insured Event as reflected in the Schedule of Benefits.
2. If two or more travel policies issued by the Company or any other member company of AIG apply to the same claim, the maximum amount payable by AIG under all such policies shall not exceed the limit of liability of whichever of such policies has the highest applicable limit of liability. Nothing contained herein shall be construed to increase the limit of liability of this Policy.
3. Children accompanying the Insured Person on an identical travel itinerary shall share cover with him. A maximum of 5 Children per Insured Person can be covered when benefits are shared. This will apply on an Individual or Family Plan. The Spouse will have full cover on a Family Plan.
4. The maximum amount payable in the event of death or Permanent Total Disablement of a child will be 20% of the Benefit, or in respect of death that amount which is legislated at the Date of Loss, whichever is the lesser.
CANCELLATION/TERMINATION

Cancellation
1. Provided that no claims have been initiated the Insured Person may cancel this Policy at any time by giving the Company written notice 15 days prior to his intended date of departure.
2. This Policy may be cancelled by the Company giving 15 days written notice if the Insured Person has been in breach of any of its Terms, Conditions, Endorsements, Terminations and Exclusions in which case the Company will refund a pro-rata premium for the unexpired policy period.
3. The Company may cancel this Policy by sending the Insured Person notice in writing to his last known address. If the premium is paid annually in advance and the Policy is cancelled other than at the anniversary date, the Company will refund a pro-rata premium provided that no claims have been initiated.

Termination
This Policy will terminate on the earliest of the following dates:
1. On the date the Master Policy is cancelled; or
2. The date of the Insured Person’s return to the Point of Departure in Kenya; or
3. The date that the Insured Person reaches the maximum age for the cover selected.

This Policy will terminate on the expiry date appearing on the insurance certificate unless there is an automatic extension as described under the general conditions applying to this Policy.

PLAN NAMES
The Policy Schedule refers to the persons insured under this Policy by reference to the “Plan Selected”.

Individual and Family options as reflected on the Schedule of Benefits.

Individual Cover - Includes The Insured Person and his Children (up to a maximum of 5 Children per Policy).
Family Cover - Includes The Insured person, his Spouse and their Children (up to a maximum of 5 Children per Policy).
Student Cover - Includes the Insured Person Only.
Seniors Cover – Includes The Insured Person Only aged between 71 and 80 years. In Country Cover – Includes The Insured Person Only Inbound cover - Includes The Insured Person Only

DEFINITIONS
In this Policy the following definitions apply:

Accident means a sudden unexpected and specific event which occur.; at an identifiable time and place, resulting in Injury.
Accumulation Limit means the maximum liability of the Company in respect of any one Accident or number of Accidents arising from one source or cause during an Insured Journey.
Aids means an opportunistic infection or a malignant neoplasm. For the purpose of this definition, the term “Acquired Immune Deficiency Syndrome” shall have the meaning assigned to it by the World Health Organisation. “Opportunistic infection” shall include but not be limited to pneumonia caused by pneumocystis carini, the organism of chronic enteritis virus and or disseminated fungal infections. “Malignant Neoplasm” shall include but not be limited to Kaposi’s Sarcoma, lymphoma of the central nervous system and or other malignancies now known or which may become known as immediate causes of death in the presence of Acquired Immune Deficiency Syndrome. Acquired Immune Deficiency Syndrome” shall include H.I.V. (Human Immune Deficiency Virus),encephalathy (dementia) or H.I.V. wasting syndrome.
Any One Life Limit means the maximum liability of the Company to any one Insured Person in respect of any one Accident or Illness or series of Accidents or Illnesses arising from one source or cause.

Beneficiary means the person or persons nominated by the Insured Person.

Business Associate means a partner, director or employee of the Insured Person, under the age of 71 years.

Children means the Insured Person’s dependant children who are not in full-time employment and who are between the ages of 6 months and 19 years (or under the age of 25 years provided they are in full-time education), unmarried, not pregnant, without children and primarily dependent on the Insured Person for maintenance and support.

Confinement means confinement to a Hospital as a resident in-patient for a period which is necessary for the diagnosis or treatment of any Injury or Illness. Contact Sport means any sport in which physical contact between players is an accepted part of play. Country of Residence means the country of which the Insured Person is a citizen or permanent resident. Date of Loss means:

(a) for Illness, the first date of diagnosis or the date the Insured Person first became aware of the Illness - whichever occurs earlier;
(b) for Injury, the date of the Accident;
(c) for all other Sections, the date of the Insured Event.

Day means a period of 24 consecutive hours including the day of admission but excluding the day of discharge. Effective Date of Coverage means:

(a) for cancellation, the date on which the Policy is issued;
(b) for all other sections of cover, the date of departure.

Excess means the first amount, or period, of each and every loss payable by the Insured Person.

Follow up Treatment in Kenya means all Reasonable and Customary Charges incurred for Illness or Injury, resulting in hospitalisation, surgical or other diagnostic or remedial treatment given or prescribed by a qualified Medical Practitioner, dentist or optometrist. Follow up treatment in Kenya does not include those expenses the Company is prohibited by law from paying.

Hazardous Pursuits means any activity which introduces or increases the possibility of a loss arising from a peril or which may influence the extent of a loss. Hospital means a legally constituted establishment which operates pursuant to the laws of the country in which it is based and which meets the following requirements:

(a) it operates primarily for the reception, medical care and treatment of sick, ailing or injured persons on a resident in-patient basis; (b) it admits resident in-patients only under the supervision of a Medical Practitioner;

(c) it maintains organised facilities for the medical diagnosis and treatment of such persons and provides (where appropriate) facilities for major surgery within the confines of the establishment or facilities controlled by the establishment;

(d) it provides a full-time nursing service by or under the supervision of a staff of nurses;

(e) it is not a day clinic, health hydro or nature clinic, a mental institution, an institution confined primarily to the treatment of psychiatric disease, the psychiatric department of a hospital, a place for the treatment of chemical dependency, an establishment or a special unit of a hospital used primarily as a place for treatment of drug addicts or alcoholics, a hospice, a frail care centre, a rest home or nursing, convalescent, rehabilitation, assisted living or extended care facility.

Illness means any fortuitous sickness or disease contracted, commencing or first manifesting itself during an Insured Journey.
Injury means physical trauma to an Insured Person caused by an Accident resulting, solely and independently of any other cause or any other physical defect or infirmity existing prior to the Accident, in an Insured Event within 24 months of the date of the Accident. Physical trauma caused by exposure to the elements of nature as a direct result of an Accident will be deemed to be an injury. Insured Event means an event stated in the Schedule of Benefits.

Insured Journey means a journey of more than 100 kilometres away from the Insured Persons usual place of residence or business commencing at the time when the Insured Person leaves his usual place of residence or business to travel in a direct, timeous and uninterrupted manner on a Local or International Journey.

Insured Person means any person whose name appears on the insurance certificate and with respect to whom premium has been paid.

International Journey means an Insured Journey commencing from the Point of Departure to the destination, outside the territorial limits of Kenya, Including the return journey to the Point of Departure. An inbound cover shall commence upon entry into Kenya and cease on departure from Kenya.

International Journey means an Insured Journey commencing from the point of departure to the destination, outside the territorial limits of Kenya, including the return journey to the point of departure.

Manual labour means physical labour involving the use of hands or the use or operation of mechanical or non-mechanical machinery or equipment. Master Policy means the internal reference for a specific product containing identical Benefits and premium rates.

Medical Expenses means all Reasonable and Customary- Charges for Illness or Injury on an International Journey resulting in hospitalisation, surgical or other diagnostic or remedial treatment given or prescribed by a Medical Practitioner. Medical Practitioner means a person registered with a current, legal licence to practise medicine, but excludes an Insured Person or a member of any Insured Person's immediate family.

Medical Treatment means a Medical Practitioner’s medical advice, treatment, consultations and prescribed or repeat maintenance medication.

Local Journey means an Insured Journey commencing at the time of departure from the Point of Departure for the purpose of travelling in a direct and timeous direction to the Point of Destination, both of which are within the territorial limits of Kenya including the return journey to the Point of Departure. Permanent and Incurable Insanity means the Insured Person being diagnosed as permanently and incurably insane according to the usual and customary standards of the registered medical profession. The permanent and incurable Insanity must have resulted directly from Injury.

Permanent and Incurable Paralysis means the complete and permanent loss of use of arms or legs, or one arm and one leg, through paralysis.

Permanent and Total Loss means the loss by physical severance or the permanent and total loss of use of a hand, foot, thumb, finger, toe, arm or a leg. Permanent and Total Loss of Hearing means the total, irreversible loss of hearing of all sounds confirmed by medical evidence relying on audio-metric and sound-threshold tests. Permanent and Total Loss of Sight means the total, irreversible loss of sight. Loss of sight will be deemed to have occurred if the degree of sight remaining after correction is 3/60 or less on the Snellen scale.

Permanent and Total Loss of Speech means the total and irrecoverable loss of the ability to speak. "Loss of the ability to speak" means the inability to make a comprehensible word or an understandable verbal language.

Permanent Total Disablement means total and absolute disablement which entirely prevents the Insured Person from engaging in or giving attention to his usual or any occupation for which he is qualified or has received specialised training and which will in all probability be lasting and continuous for his lifetime.
Personal Effects means spectacles, dentures, purses, wallets, cosmetics and other personal effects normally worn or carried on the person.

Point of Departure means the point from which an Insured Person commences an Insured Journey, from within the territorial limits of Kenya.

Policy means this document embodying the contract of insurance and shall include any subsequent Terms, Conditions, Exclusions, Terminations and Endorsements.

Pre-Existing Medical Conditions means any condition giving rise to a claim for which, within the 6 consecutive months prior to the Effective Date of Coverage, the Insured Person, Relative or Business Associate:
(a) has consulted a Medical Practitioner or specialist; or
(b) has received Medical Treatment or advice; or
(c) the manifestation of symptoms would have caused a reasonable person to seek advice.

It also includes any condition known to the Insured Person, Relative or Business Associate prior to the Effective Date of Coverage where the Insured Person, Relative or Business Associate:
(a) is on the waiting list for Medical Treatment; or
(b) is travelling for the purpose of obtaining Medical Treatment (even if this is not the sole reason for the Insured Journey); or (c) has received a terminal prognosis; or
(d) has been recommended to continue or to commence any Medical Treatment or medication after the Effective Date of Coverage.

Private Motor Vehicle means any licensed passenger vehicle other than taxis, buses and any vehicle that is in excess of 2 tons.

Professional Player means an Insured Person who earns in excess of 50% of his income from playing sport or who participates in a sport that remunerates him as a means of livelihood.

Public Conveyance means any scheduled or chartered conveyance legally licensed to carry passengers for hire operating commercially in accordance with all locally applicable laws and regulations and in which the Insured Person is travelling only as a fare-paying passenger, including taxis and hired motor vehicles but excluding minibuses, non-standard motor vehicles and non-pressurised single engine piston aircraft.

Reasonable and Customary Charges means the charges which:
(a) are medically required for the treatment, supplies or medical service to treat an Insured Person’s condition;
(b) do not exceed the usual level of charges for similar treatment, supplies or medical services in the locality where the expenses are incurred, and
(c) do not exceed the charges for treatment that would have been made if no insurance existed.

Related Expenses means additional accommodation and travelling expenses, excluding telephone costs, meals and beverages of necessity incurred by any one person, who on the advice of a Medical Practitioner appointed by the Company remains with or escorts the Insured Person until completion of his journey or until he resumes the Insured Journey or returns to the Point of Departure, whichever occurs first.


Spouse means the husband, wife, partner in a same sex partnership or any de facto partner with whom the Insured Person has permanently and continuously lived in the same household in a relationship which is not casual or impermanent for a period longer than 6 consecutive months. Only one Spouse shall be eligible for cover.
Terrorist Act means any actual or threatened use of force or violence directed at or causing damage, injury, harm or disruption, or commission of an act dangerous to human life or property, against any individual, property or government, with the stated or unstated objective of pursuing economic, ethnic, nationalistic, political, racial or religious interests, whether such interests are declared or not. Robberies or other criminal acts, primarily committed for personal gain and acts arising primarily from prior personal relationships between perpetrator/s and victim/s shall not be considered Terrorist Acts. ‘Terrorist Act’ shall also include any act which is verified or recognised as an act of terrorism by the (relevant) government of the country where the act occurs.

Travel Companion means the person intending to travel or travelling with the Insured Person and who is covered under a Travel Guard Policy.

War means war, whether declared or not, or any warlike activities (including use of military force) by any sovereign nation to achieve economic, geographic, nationalistic, political, racial, religious or other ends.

GENERAL CONDITIONS

1. Age limits

1.1. This Policy covers any event which happens to an Insured Person who is from the age of 6 months to 71 years of age at the date of such event on the Individual Family Plan or Group Plan; from the age of 16 to 35 years of age at the date of such event on the Student Plan.

1.2. With respect to Insured Event 2 in the Personal Accident Table of Benefits, cover ceases on the Insured Person’s 65th birthday unless he is gainfully employed.

1.3. This Policy does not extend to an Insured Person over the age of 71 years in the event of a claim as a result of any cardiac or cardiovascular or vascular or cerebrovascular illness or conditions or sequelae thereof or complications that, in the opinion of a Medical Practitioner appointed by the Company, can reasonably be related thereto.

2. Airlines The Company will have no liability to pay any benefit in relation to any Insured Event for which the Insured Person may be able to seek compensation from an airline. If the Insured Person proves that he has taken all reasonable and necessary steps to claim from the airline, the Company will pay a pro-rata portion of the benefits. The Company’s liability will be calculated by reducing the benefits by the amount for which the Company considers the airline to be liable.

3. Automatic extension If an event occurs after commencement of the Insured Journey giving rise to a legitimate claim under Emergency Medical and Related Expenses and/or Curtailment, the Insured Journey shall automatically be extended. If an event occurs in terms of section 7, the cover shall be extended and shall continue in force for the duration of the seizure or control of the Public Conveyance or 12 consecutive months from the date of such seizure or control, whichever is the lesser period.

4. Currency All amounts are shown in United States Dollars (US$). If expenses are incurred in a foreign currency the rate of exchange used will be the rate at the time of incurring the expense or suffering a loss.

5. Endorsements This Policy may be extended, amended or altered by the Company or her representative, provided that the application is made in writing to the Company prior to the expiry of the existing Policy and there are neither existing nor initiated claims on the existing Policy.

6. Liability

6.1. The Company shall not be liable or responsible for:

   a) the negligence, wrongful acts and/or omissions of any legal and/or health care professional or any other person or persons or legal entity that provide direct or indirect service to the Insured Person; b) the failure of any agent or broker to explain adequately the terms, conditions, endorsements, terminations and exclusions of this Policy.
6.2. Should any discrepancies arise between this Policy and any literature received by the Insured Person, the Terms, Conditions, Endorsements, Terminations and Exclusions in this Policy will govern in all cases.

7. Language The official version of this Policy is in English. Words in the singular include the plural and vice versa and words in the masculine gender include the feminine gender.

8. Marketing Should any discrepancies arise between the Policy and any literature received by You or the Insured Person, the Terms, Conditions, Endorsements, Terminations and Exclusions in the Master Policy will govern in all cases. Any Insured Person may inspect the Master Policy at any time by arrangement with the policyholder.

9. Misrepresentation This Policy shall be voidable (at the discretion of the Company) in the event of misrepresentation, misdescription or non-disclosure by or on behalf of the Insured Person of any information material to this Policy.

10. Other financial products and services The Company will accept no liability whatsoever for any of the insurance or other financial products or services which are sold in conjunction with this Policy that are provided or underwritten by any other insurance or assurance companies and/or assistance companies and/or financial providers.

11. Other insurance Except for Section 2 - Personal Accident, if the Insured Person is able to claim under any other policies (including statutory insurance and/or medical aid and/or automatic credit card travel insurance) to be covered for the whole or any part of an Insured Event (“Other Claims”), the Company will only be liable to pay its pro rata portion of the claim submitted in terms of this Policy. 11.1 If in the Company’s discretion it decides to pay the claim in full, then it will not be obliged to make payment unless the Insured Person cedes to the Company all of their rights in respect of the Other Claims. 11.2 If the Company has already paid benefits in terms of this Policy, all of the Insured Person’s rights in respect of the Other Claims will be ceded automatically to the Company.

11.3 A cession in terms of 11.1 or 11.2 will allow the Company to do all things necessary to claim against the other insurer or company and institute legal proceedings against that other insurer or company if the Other Claim is not paid.

11.4 Without limiting any provision of this Policy or any legal obligation, the Insured Person must cooperate fully with the Company in relation to the Other Claim or legal proceedings including:
   a) not doing anything to prejudice or limit the Company’s rights;
   b) giving the Company whatever information and documents it may require;
   c) signing any document or affidavit that the Company may request to enable it to exercise its rights.

12. Payment of benefits This Policy is between the Company and the Insured Person only and all of its provisions and conditions are for the sole and exclusive benefit of those parties. Nothing in this Policy, express or implied, is intended to confer upon any other person any rights or remedies of any nature whatsoever under this Policy or any of its provisions. Without limitation, no third party shall have any rights under this Policy or any right to receive Policy benefits. Receipt of Benefits paid as follows will be a valid discharge of the Company’s liability under this Policy:

   12.1 For Emergency Medical and Related Expenses on an International Journey or Local Journey, the benefit will be paid to the provider of such Medical Expenses.

   12.2 This Policy cannot be ceded, assigned or in any way transferred to a third party. Benefits shall be payable only to the Insured Person or his legal representative.

13. Public Conveyance tickets The Company has the right to utilise the Insured Person’s Public Conveyance ticket to offset the Company’s expenses.
14. Schedule of Benefits  The Schedule of Benefits referred to in this policy wording is the Schedule of Benefits used in the AIGKenya Insurance Co. Ltd. marketing material. The policy wording is to be read in conjunction with the Schedule of Benefits in the marketing material and vice versa.

15. Kenyan Law  This Policy will be governed by the laws of Kenya and its courts shall have exclusive jurisdiction to the exclusion of the courts of any other country.

16. Subrogation  The Company has the right to commence or take over legal proceedings in the Insured Person's name for the defence or settlement of any claim, or to sue or prosecute any other party to recover monies payable by them at law. The Insured Person must co-operate with the Company and do nothing to hinder the Company's rights.

17. Tax or imposts  The onus will always be on the Insured Person to ensure, correctly admit and pay any tax liability in consideration of any benefit being paid that may incur tax or imposts of any nature.

CLAIMS CONDITIONS

1. Compliance  The Insured Person must follow the Company's advice or instruction otherwise the Company may decline to pay the whole or any part of the claim.

2. Legal action  If the Company denies liability for any claim and the Insured Person does not institute legal action and serve summons on the Company (or initiate arbitration proceedings if the Company has agreed to submit to arbitration) within 12 months after such repudiation, all benefits of such claim shall be forfeited.

3. Notice of claim and proof of loss  
   3.1 The Insured Person must give the Company notice in writing: 
      a) Within 90 days of an Accident which may give rise to a claim under section 2 of this Policy. Any benefit related to death will only be payable if the Company receives written notification of the death within 30 days. The Company shall have the right to have a postmortem examination of the body conducted. 
      b) Within 30 days of any other occurrence which may give rise to a claim under this Policy. 
   3.2 The Insured Person must, at his own cost, provide whatever certificates, information and documented evidence (“Evidence”) is required by the Company regarding the Insured Event.

4. Recoveries  All recoveries net of the Company's actual recovery costs will be distributed firstly to the Company for all amounts paid and any remainder will be paid to the Insured Person.

5. Fraudulent Claims  If the Insured Person, or anyone acting on his behalf use any fraudulent means or devices to obtain any benefit, then any amount payable in respect of such claim shall be forfeited.

6. General  
   6.1 The Insured Person shall submit to medical examination at the expense of the Company as often as shall be required in connection with any claim. Any report generated as a result of such examination shall be the property of the Company and shall be deemed to be confidential information of the Company.

   6.2 Medical Treatment shall be sought and followed promptly on the occurrence of an Injury or Illness and the Company shall not be liable for that part of any claim which in the opinion of a Medical Practitioner arises from the unreasonable or wilful neglect or failure of any Insured Person to seek and remain under the care of a qualified Medical Practitioner.

   6.3 All claims arising from criminal incidents are to be supported and accompanied by a certified police report.

   6.4 The due observance and fulfilment of the Policy insofar as it relates to anything being done or complied with by the Insured Person, shall be a condition precedent to liability to make any payment under this Policy.
6.5 The Company shall have the right to access any current or prior medical records of the Insured Person in order to finalise and/or proceed with the assessment of a claim and/or render medical assistance. By virtue of this clause, the Insured Person shall be deemed to have given the Company written consent to access any of the Insured Person’s current or prior medical records.

6.6 No amount payable in terms of this Policy shall bear any Interest.

CLAIMS PROCEDURES
A completed claim form that has been signed by the Insured Person, copies of the airline ticket, the insurance certificate and other items that may be necessary, are required on all claims together with the following documents for the different types of losses.

Emergency Medical Expenses
(a) All bills to be submitted with claims.
(b) If Illness is possibly pre-existing then the Insured Person is to supply his normal Medical Practitioner’s report stating what treatment was received prior to the commencement of the Insured Journey.
(c) Name of the Medical Practitioner as well as his address and telephone number.

Death, Disability and Injury
(a) Medical Reports.
(b) Death Certificate indicating cause of death.
(c) Inquest and post mortem reports.
(d) Police Report if death is due to a motor accident. The police station and reference number if death is the subject of criminal investigation. (e) Claim Notification Period for this Section will be 90 days.

Cancellation or Curtailment
(a) Relevant Medical certificates or death certificates in the case of death.
(b) Original air-tickets or Travel documents.
(c) Proof of deposits not recoverable.
(d) Police Reports in case of accidents or hijack.
(e) Proof of material loss.

Baggage Loss
(a) The Insured Person must obtain Passenger/Property irregularity report from the relevant carrier, in order to substantiate the claim.
(b) Police Report to be submitted if loss is due to theft.
(c) Receipts to be submitted as proof of payment.

GENERAL EXCLUSIONS
The Company will not be liable to pay any benefit caused by or arising directly or indirectly from:
1. War, invasion, act of foreign enemy, hostilities, civil war, rebellion, revolution, insurrection or military or usurped power, labour disturbances, riot, strike or lock-out; or
2. The intentional use of military force to intercept, prevent, or mitigate any known or suspected Terrorist Act; or
3. Any Terrorist Act or bomb incident or threat thereof; or
4. The use, release or escape of nuclear materials that directly or indirectly results in ionising, radiation or contamination by radioactivity from any nuclear fuel or from nuclear weapons materials. For the purpose of this exclusion only combustion shall include any self-sustaining process of nuclear fission; or
5. The dispersal or application of pathogenic or poisonous biological or chemical materials; or
6. Being in service or on duty with or undergoing training with any military
or police force, or militia or paramilitary organisation; or

7. Engaging in occupational activities underground or requiring the use of explosives; or

8. Wilful or deliberate exposure to danger (except in an attempt to save human life), intentional self-inflicted injury, suicide or attempt thereof; or

9. Deliberate violation of criminal law; or

10. Travelling by air except as a passenger on a legally licensed aircraft or where the Insured Person is acting as part of the aircraft crew; or

11. Mental disorders including, but not limited to anxiety disorders, eating disorders, psychotic disorders, affective disorders, personality disorders, substance use disorders, somatoform disorders, dissociative disorders, psychosexual disorders, adjustment disorders, organic mental disorders, mental retardation and autism; or

12. Pregnancy or childbirth of the Insured Person (except for an unexpected medical complication or emergency occurring during the first 26 weeks of the pregnancy); or

13. Sexually transmitted diseases and/or related illness or condition including derivatives or variations thereof, howsoever acquired or caused; or

14. Chronic fatigue syndrome or myalgic encephalomyelitis (M.E.) (anti cardiolipin antibody positivity) or the Illness commonly referred to as Yuppies Flu; or

15. Non-adherence to medical advice; or

16. a) An Insured Person being under the influence of alcohol with more than the legal limit of alcohol in his blood or breath; or b) An Insured Person being under the influence of drugs or narcotics unless such drugs or narcotics were administered by a Medical Practitioner or unless prescribed by and taken in accordance with the directions of a Medical Practitioner; or c) An Accident occurring whilst an Insured Person was driving a motor vehicle with more than the legal limit of alcohol in his blood or breath; or d) Alcohol abuse, alcoholism, substance abuse, solvent abuse, drug abuse or addictive conditions of any kind; or

17. (a) Pre-existing Medical Condition; or

(b) Any cardiac or cardio vascular or vascular or cerebrovascular Illness or conditions or sequelae thereof or complications that, in the opinion of a Medical Practitioner appointed by the Company, can reasonably be related thereto, if the Insured Person has received medical advice or treatment including medication) for hypertension 6 months prior to the commencement of the Insured Journey; or

18. An Insured Person travelling against medical advice or to seek medical attention or advice or with a terminal condition which was diagnosed prior to the Insured Journey or when he is unfit to do so; or

19. Any cardiac or cardio vascular or vascular or cerebrovascular Illness or conditions or sequelae thereof or complications that, in the opinion of a Medical Practitioner appointed by the Company, can reasonably be related thereto, for persons over the age of 70 years; or

20. a) Employment involving Manual Labour; or b) Undertaking employment on a permanent or contract basis which is not casual; or

21. a) Participating in any sport as a Professional Player; or b) School sports; or

22. Any hazardous pursuits, sports or activities which Introduce or Increase the possibility of a loss including but not limited to engaging in motorcycling (where the engine capacity exceeds 200CC or the cycle is under control of an unlicensed driver), steeple-chasing, polo or horseback riding, hunting, bungee jumping, abseiling, white water rafting, hiking (unless licensed accompanied by a recognised guide or on a clearly marked route), mountaineering requiring the use of ropes or equipment, scuba diving (unless licensed or accompanied
by a qualified Instructor), potholing, fighting (except in bona fide self defence), racing (other than on foot or under sail in inland waters), being a crew member on a ship or boat travelling from one country to another, speed or endurance racing or practise thereof (other than athletics), or training for or engaging in contact sports where physical contact between players is an accepted part of play unless an Endorsement has been issued and additional premium charged and authorised by the Company and paid by the Insured Person. This remains at the discretion of the Company; or

23. Consequential loss of any kind or financial loss and/or expense not otherwise specifically covered; or

24. Default or Insolvency of the carrier; or

25. The Insured Person’s Intention to emigrate. The Company will however cover the Insured Person for Emergency Medical and Related Expenses for 30 consecutive days after his arrival in his new country of residence. The Company will only pay in respect of any Emergency Medical and Related Expenses claim that which would normally have been paid by a Medical Aid Company had such an event happened in the Insured Person’s Country of Residence.

26. Travel in, to or through Cuba, Iraq or any other country will not be covered in so far as such cover violate any trade embargo and/or economic sanction laws or regulations as is binding on the insurer.

27. Any terrorist or member of a terrorist organization, narcotics trafficker, or purveyor of nuclear, chemical or biological weapons.

28. The Company is not liable to make any payments for liability under any coverage sections of this policy or make any payments under any extension: For any loss of claim arising in, or where the Insured or any beneficiary under the policy is a citizen or instrumentality of the government of, any country (ies) against which any laws and/or regulations governing this policy and/or the Insurer, its parent company or its ultimate controlling entity have established an embargo or other form of economic sanction which have the effect of prohibiting the insurer to provide insurance coverage transacting business with or otherwise offering economic benefits to the insured or any other beneficiary under the policy.

If it is further understood and agreed that no benefits or payments will be made to any beneficiary (ies) who is/are declared unable to receive economic benefits under tile laws and/or regulations governing this policy and/or the insurer, its parent company or its ultimate controlling entity.

All other terms, conditions and exceptions remain unchanged.

If the Company alleges that by reason of clauses 8, 9, 13, 17 or 24 of tile above exclusions, loss or damage is not covered by this Policy, tile burden of proving the contrary shall rest on the Insured Person.

SECTION 1 - MEDICAL AND RELATED EXPENSES

SECTION 1 A - MEDICAL EXPENSES

International Journey
If an Insured Person whilst travelling on an International Journey, incurs Medical Expenses as a result of Illness or injury, the Company will pay for those expenses.

Local Journey
If an Insured Person whilst travelling on a Local Journey, incurs Medical Expenses as a result of an Injury, the Company will pay for those expenses provided they are incurred within the territorial limits of Kenya.

SECTION 1 B - DENTAL EXPENSES

The Company will pay for emergency dental treatment to restore dental function or alleviate pain provided by a registered and legally qualified dentist up to the
amount stated in the Schedule of Benefits. Where dentistry is required as a result of Illness or Injury to restore dental function and/or alleviate pain whilst on an International Journey and Injury to restore dental function and/or alleviate pain whilst on a Local Journey, these expenses will form part of the benefit amount stated under Section 1A - Medical Expenses.

The maximum the Company will pay is limited to the amount as specified in the Schedule of Benefits except where caused by Injury.

SECTION 1C - OPTICAL EXPENSES
The Company will pay for emergency optical treatment provided by a Medical Practitioner or optician up to the amount stated in the Schedule of Benefits. Where optical treatment is required as a result of Illness or Injury whilst on an International Journey and Injury on a Local Journey, these expenses will form part of the benefit amount as stated under Section 1A - Medical Expenses.

The maximum the Company will pay is limited to the amount as specified in the Schedule of Benefits except where caused by injury.

SECTION 1D - FOLLOW UP TREATMENT IN KENYA
If an Insured Person incurs Follow up Treatment in Kenya for an:
1. Illness or Injury; or
2. Optical or dental condition arising from Injury; which was first treated outside his Country of Residence, the Company will pay the Insured Person for those expenses provided such Medical Expenses are Incurred within 30 days of his return to the Point of Departure and provided such expenses are not recoverable by or on his behalf from any other source.

SECTION 1E - HOSPITAL CASH BENEFIT (CONFINEMENT)- ONLY APPLICABLE IF STUDENT COVER IS SELECTED
The Company will pay for Confinement as a result of Injury or Illness whilst on an International Journey. The Company will pay for each complete Day of confinement.

SECTION 1 - SPECIFIC CONDITIONS
1. If the Insured Person wants the Company to pay for any medical expenses in excess of US$365, AIG Travel must be contacted and their prior written agreement must be obtained. If not approved by AIG Travel the Company’s liability will be limited to US$365 for any one Insured Event.
2. Medical Expenses as a result of emergency dental treatment are limited to dentistry received within 30 days of the Accident.
3. Medical and Related Expenses shall only be paid until such time as a Medical Practitioner appointed by the Company decides that an Insured Person is capable of being repatriated. If the Insured Person is capable of being repatriated and elects not to return to the Point of Departure, all expenses incurred in respect of the occurrence will be for the Insured Person’s own account.

SECTION 1 - SPECIFIC EXCLUSIONS
The Company will not pay for any medical expenses:
1. Incurred for continuing treatment, including any medication commenced prior to the commencement date of the Insured Journey, which the Insured Person has been advised to continue whilst on an Insured Journey; or
2. Incurred within Kenya notwithstanding that such expenses may arise from Injury or Illness suffered by the Insured Person during the period of an Insured Journey and other than in accordance with Section 1 (A) - Local Journey Injury or Section 1D - Follow up treatment in Kenya as a result of an Injury or Illness or an inbound injury or illness covered under an Inbound cover; or
3. Incurred due to investigatory treatment that is not specified by a Medical Practitioner as immediately necessary; or
4. For fillings or crowns of precious metal; or
5. For any procedures relating to dental or oral hygiene; or
6. For specialist Medical Treatment without referral from a Medical Practitioner; or
7. Relating to contraceptive devices, prosthetic devices, medical appliances or artificial aids; or
8. For preventative treatment. Including but not limited to any vaccination And/or immunisation; or
9. In excess of US$100 for either physiotherapy or chiropractic treatment, unless confined to a Hospital.
10. The excess as defined in the schedule of benefits.

SECTION 2 - PERSONAL ACCIDENT

SECTION 2A - DEATH AND DISABILITY

If an Insured Person sustains an Injury resulting in an Insured Event described in the Table of Benefits below, the Company will pay the Insured Person or his legal representative the compensation as stated in the Schedule of Benefits.

If an Insured Person disappears and after 24 consecutive calendar months it is reasonable for the Company to believe that he may have died due to an Injury, the Company will pay the benefit subject to receipt of a signed undertaking by his beneficiary that such compensation shall be refunded if it is later demonstrated that he did not die as a result of an Injury. This written undertaking will be required at the point where this benefit becomes payable.

<table>
<thead>
<tr>
<th>INSURED EVENT</th>
<th>COMPENSATION EXPRESSED AS A PERCENTAGE OF THE SUM INSURED</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Death</td>
<td></td>
</tr>
<tr>
<td>a. As a result of an Accident</td>
<td>100%</td>
</tr>
<tr>
<td>b. Disappearance</td>
<td>100%</td>
</tr>
<tr>
<td>c. Death as a direct result of exposure to the elements of nature as a direct result of an Accident</td>
<td>100%</td>
</tr>
<tr>
<td>2. Permanent Total Disablement</td>
<td></td>
</tr>
<tr>
<td>a. As a result of an Accident</td>
<td>100%</td>
</tr>
<tr>
<td>b. Permanent Total Disablement as a direct result of exposure to the elements of nature as a direct result of an Accident</td>
<td>100%</td>
</tr>
<tr>
<td>3. Permanent Disability</td>
<td></td>
</tr>
<tr>
<td>3.1 Permanent and Total Loss of:</td>
<td>100%</td>
</tr>
</tbody>
</table>
### TABLE OF BENEFITS

<table>
<thead>
<tr>
<th>Condition</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Both hands or both feet</td>
<td>100%</td>
</tr>
<tr>
<td>b. One hand and one foot</td>
<td>100%</td>
</tr>
<tr>
<td>c. Either hand or foot and sight of one eye</td>
<td>100%</td>
</tr>
<tr>
<td>d. One hand or one foot</td>
<td>50%</td>
</tr>
<tr>
<td><strong>3.2 Permanent and Total Loss of Sight in:</strong></td>
<td></td>
</tr>
<tr>
<td>a. Both eyes</td>
<td>100%</td>
</tr>
<tr>
<td>b. One eye</td>
<td>50%</td>
</tr>
<tr>
<td><strong>3.3 Permanent and Total Loss of Hearing in:</strong></td>
<td></td>
</tr>
<tr>
<td><strong>b. One ear</strong></td>
<td>100% 50%</td>
</tr>
<tr>
<td><strong>3.4 Permanent and Total Loss of Speech</strong></td>
<td>100%</td>
</tr>
<tr>
<td><strong>3.5 Permanent and Incurable Insanity</strong></td>
<td>100%</td>
</tr>
<tr>
<td><strong>3.6 Permanent and Incurable Paralysis</strong></td>
<td>100%</td>
</tr>
<tr>
<td><strong>3.7 Permanent and Total Loss of four fingers and thumb of either hand</strong></td>
<td>70%</td>
</tr>
<tr>
<td><strong>3.8 Permanent and Total Loss of four fingers of either hand</strong></td>
<td>40%</td>
</tr>
<tr>
<td><strong>3.9 Permanent and Total Loss of thumb of either hand:</strong></td>
<td></td>
</tr>
<tr>
<td>a. Both joints</td>
<td>30%</td>
</tr>
<tr>
<td>b. 2 One joint</td>
<td>15%</td>
</tr>
<tr>
<td><strong>3.10 Permanent and Total Loss of a finger of either hand:</strong></td>
<td></td>
</tr>
<tr>
<td>a. 2 Three joints</td>
<td>10%</td>
</tr>
<tr>
<td>b. 2 Two joints</td>
<td>7.5%</td>
</tr>
<tr>
<td>c. 2 One joint</td>
<td>5%</td>
</tr>
<tr>
<td><strong>3.11 Permanent and Total Loss of toes of either foot:</strong></td>
<td></td>
</tr>
<tr>
<td>a. 2 All in one foot</td>
<td>15%</td>
</tr>
<tr>
<td>b. 2 Great - both joints</td>
<td>5%</td>
</tr>
<tr>
<td>c. 2 Great - one joint</td>
<td>3%</td>
</tr>
<tr>
<td>d. 2 Other than great - each toe</td>
<td>1%</td>
</tr>
<tr>
<td><strong>3.12 Fracture of leg or patella with established non-union</strong></td>
<td>10%</td>
</tr>
<tr>
<td><strong>3.13 Shortening of leg by at least 5cm</strong></td>
<td>7.5%</td>
</tr>
<tr>
<td><strong>3.14 Permanent disability not otherwise provided for under items 3.1 - 3.13 inclusive</strong></td>
<td>A percentage of the sum insured up to a maximum of 15%</td>
</tr>
</tbody>
</table>
SECTION 2A- SPECIFIC CONDITIONS

1. The Company will not pay for any benefit in respect of:
   (a) Permanent Total Disablement except on submission of satisfactory proof to the Company that the disablement will in all probability continue for the remainder of an Insured Person’s life;
   (b) More than 100% of the sum insured when more than one Injury arises from the same Accident
   (c) More than one category for more than 100% of the sum insured. The benefit payable will be the highest in the appropriate category.

2. If the Insured Person sustains Permanent Total Disablement and the claim in relation to that disability is admitted and accepted, the benefit will be paid and all cover under this Section 2A in respect of such Insured Person shall cease. 3. The diagnosis and determination of Permanent Total Disablement or any Permanent Disability must be made and documented by a Medical Practitioner and must be continuous and permanent for at least 12 consecutive months from the onset of the disablement. However:
   a) For Permanent and Total Loss of Speech, the loss of the ability to speak must be continuous and permanent for at least 12 consecutive months and medical evidence must confirm Permanent and Total Loss of Speech and all psychiatric related causes must be excluded; and b) For Permanent and Incurable Paralysis, the loss of use must be continuous and permanent for at least 12 consecutive months from the onset of the paralysis.

4. If the Insured Person’s existing ailment, infirmity or other abnormal physical or mental condition is aggravated by an Accident, the Benefit amount will be determined by the degree of the deterioration of the existing ailment after the Accident and the Benefit will be paid accordingly. The degree of ailment, infirmity or other abnormal physical or mental condition before the Accident will be determined by medical evidence.

5. If the consequences of an Accident are aggravated owing to an Insured Person’s existing ailment, infirmity or other abnormal physical or mental condition, determination of the benefit will be based on the consequences the Accident would have had, had such defects not existed. The foregoing shall not apply, however, if such circumstances are a consequence of an earlier Accident to the Insured Person, for which benefit has been or will be paid under this Policy.

6. If an Insured Person dies of natural causes prior to the final disablement assessment relating to an Insured Event, the Company will pay what reasonably would have had to be paid for such Permanent Disability in accordance with Specific Condition 1 (b) above.

7. In the event of death of Children, the benefit payable will be subject to the amount legislated by law at the time of the death.

8. Children are excluded from any benefit for occupational disability under Permanent Total Disablement.

SECTION 2 -SPECIFIC EXCLUSION

The Company will not be liable to pay any benefit under this section in respect of any Insured Person for any Insured Event caused by or arising directly or indirectly from any type of Illness, or bacterial infection, except that this exclusion shall not apply to medically acquired infections or blood poisoning, including pyogenic infections, which may result from an accidental cut or wound.
SECTION 3 - AIG Travel

SECTION 3A - ASSISTANCE SERVICES

An Insured Person is entitled to the worldwide services of AIG Travel. In the event of a medical or other emergency, the Insured Person must call reverse charges - the AIG Travel number shown on the Emergency Travel Card (+44 0 1273 739274) which has been supplied to the Insured Person and which should be carried by all Insured Persons during an Insured Journey.

AIG Travel has a worldwide team of doctors, medical professionals and insurance specialists who are available 24 hours a day for advice and assistance for medical emergencies and any associated problems or enquiries regarding the Policy that the Insured Person might encounter during an Insured Journey.

AIG Travel arranges access to the following services free of charge, subject to the Policy terms and conditions:

1. Cash advances If as a result of theft, loss, Illness or Injury the Insured Person requires funds to pay for travel or accommodation, AIG Travel will advise him or his representative on how to obtain additional funds. AIG Travel will charge an administration fee for this advice.

2. Consular referral Wherever possible AIG Travel will provide an Insured Person with the details of the representative of the relevant consulate.

3. Emergency travel and accommodation arrangements Wherever possible AIG Travel will provide an Insured Person all reasonable, possible and practicable assistance in arranging emergency alternative transportation and accommodation.

4. Transmission of urgent messages AIG Travel will transmit urgent (personal) messages on behalf of or to an Insured Person in the event of travel delay, Illness or Injury.

SECTION 3B - ACCOMPANYING FAMILY MEMBER

If the Insured Person suffers Illness or Injury resulting in him being hospitalised for a period of more than 5 consecutive days, the Company will pay, subject to medical advice and the Company’s written agreement, the reasonable Related Expenses for one Relative to travel to, remain with, or accompany him back to his Point of Departure.

SECTION 3C - RETURN OF CHILDREN

If the Insured Person’s accompanying Children are left stranded at the time of him being confined to a Hospital or his repatriation or Death, the Company will amend their existing tickets or if not possible, arrange and pay up to the amount stated in the Schedule of Benefits, for their transportation back to the Point of Departure, with a qualified escort if necessary, provided they are also insured under this Policy or a Travel Guard Policy.

SECTION 3D - RETURN OF TRAVEL COMPANION

In the event of the Insured Person being confined to a Hospital or his repatriation or death, We will amend his Travel Companion’s existing tickets or if not possible, arrange and pay up to the amount stated in the Schedule of Benefits, for their transportation back to the Point of Departure, with a qualified escort if necessary, provided they are also insured under this Policy or a Travel Guard Policy.

SECTION 3E - LEGAL ASSISTANCE ABROAD

If the Insured Person is imprisoned or threatened with imprisonment, the Company will help him find a lawyer and will pay the Insured Person for the legal expenses paid to a lawyer subject to the limits on the schedule of benefits under the plan chosen.
SECTION 3E - SPECIFIC CONDITIONS

1. The Company shall have complete control over the legal proceedings.
2. The lawyer nominated by the Company must be qualified to practice in the court of the country where the event, giving rise to the claim, occurred or where the Insured Person is resident. The Insured Person, acting reasonably, does not have to accept the lawyer nominated by the Company. If the Insured Person does not agree with the Company regarding the suitability of the lawyer, the Company will ask the ruling body for lawyers in that country to nominate another lawyer. In the interim the Company may appoint a lawyer to protect the Insured Person’s interests.
3. If an award or compensation is made and payment is received by the Insured Person or a lawyer instructed on his behalf, then all sums advanced or paid by the Company shall be refunded to the Company.
4. The Insured Person must notify the Company as soon as possible of any incident which may give rise to a claim but in any event not later than 48 hours after the incident.

SECTION 3E - SPECIFIC EXCLUSIONS

The Company will not pay for costs or expenses:
1. Incurred without prior authorisation by AIG Travel; or
2. In respect of the pursuit of a claim against the Company, AIG Travel, AIG, a travel agent, tour operator or conveyance carrier; or
3. Incurred as a result of actions between Insured Persons, or actions pursued in order to obtain satisfaction of a judgement or legally binding decision; or
4. In respect of claims caused by any member of the Insured Person’s family or household.

SECTION 3F - RETURN OF MORTAL REMAINS/BURIAL EXPENSES

If an Insured Person dies as a result of an Insured Event, the Company will pay the reasonable cost of returning his mortal remains to the Country of Residence or the Point of Departure or the reasonable funeral and related costs if the body is buried or cremated at the place of death.

SECTION 3G - COFFIN EXPENSES

If an Insured Person dies as a result of an insured event, the Company will pay for the coffin expenses when the mortal remains are returned to the Country of Residence or Point of Departure.

SECTION 3H - MEDICAL EVACUATION, REPATRIATION OR TRANSPORT TO MEDICAL CENTRE EXPENSES

If an Insured Person suffers an Illness or Injury covered under Section 1A - Medical Expenses that necessitates emergency transportation, the Company will:
1. Transfer the insured person to another location to obtain necessary medical treatment; and/or
2. Repatriate the insured person to his point of departure; and/or
3. Pay for the cost of the required service including the necessary accompanying medical staff.

SECTION 3H - SPECIFIC CONDITIONS

1. If the Insured Person wants the Company to pay for emergency transportation, AIG Travel must be contacted and their prior written agreement obtained. (This requirement does not include in-country emergency ambulance transfers from place of illness or injury to a Hospital, which will be paid for by the Company provided that such service was medically necessary or was authorised by a local authority such as the police or a medical officer.)
2. The Company will decide where and how to move the Insured Person depending on the medical advice received.
3. The Company will use the Insured Person’s return ticket towards their costs if he is returned to his Point of Departure.
SECTION 4 - CANCELLATION OR CURTAILMENT

SECTION 4A - CANCELLATION

The Company will reimburse the non-refundable unused portion of travel or accommodation costs paid by the Insured Person following necessary cancellation of the Insured Journey prior to departure due to:

1. The Insured Person’s unexpected death, Illness or Injury or the unexpected death, Illness or Injury of his Spouse, Business Associate, Children, the person with whom the Insured Person had intended to stay abroad, a Relative or Travel Companion.

2. Non availability of the person that is in charge of the Insured Person’s minor or disabled Children due to such person’s unexpected death, Illness or Injury within 30 days prior to the date of the Insured Journey.

3. Serious or considerable accidental material damage to immovable property owned by the Insured Person caused within 30 days of the intended date of departure. The cause of such damage must be; unintentional, not as a direct result of any action of the Insured Person and require him to cancel the Insured Journey for the safeguarding of his interests.

4. Theft or complete immobilisation of the Insured Person’s Private Motor Vehicle at the moment of departure or during the trip towards the destination due to a traffic accident, fire or as a result of a hijacking.

5. Delay in reaching the place of embarkation for any Public Conveyance operating on land, air or water as a result of immobilisation of more than one hour due to a traffic accident or circumstances beyond one’s control (“Act of God”) during the trip towards the place of embarkation.

6. Termination of the Insured Person’s employment by the employer for economic reasons within 30 days prior to the date of departure including retrenchment.

SECTION 4B - CURTAILMENT

The Company will reimburse the Insured Person the non-refundable unused portion of travel or accommodation costs paid by him following necessary Curtailment (shortening and/or alteration) of the Insured Journey due to:

1. His unexpected death, Illness or Injury or the unexpected death, Illness or Injury of his Spouse, Business Associate, Children, the person with whom he had intended to stay abroad, a Relative or Travel Companion.

2. Loss or theft of travel documents (travel tickets, passports and visas).

SECTION 4B - SPECIFIC CONDITION

It is a condition that should the Insured Person need to return to the Point of Departure for any reason, AIG Travel must be contacted beforehand to make the travel arrangements.

SECTION 4 - SPECIFIC DEFINITION

Retrenchment means the termination of an employee’s services where the specific job no longer exists as a consequence of a variety of possible factors including advances in technology, permanent changes in operation processes or markets, closure of an operation or is an exercise whereby management decides to reduce the number of employees due to a downturn of the economy or poor financial performance but excluding:-

a) Where the Insured Persons are the owners or co-owners of the business exercising the Retrenchment programme or where the Insured Person/s are a director of the company where it is found that the directors were instrumental in the demise of the company; or b) Due to Illness or Injury; or

c) Resignation from normal occupation or voluntary retrenchment; or

d) Where the Government nationalises or takes over the business; or

e) Prior knowledge that Retrenchment would happen when the Policy was purchased.
SECTION 4 - SPECIFIC EXCLUSIONS
The Company will not pay for any expenses arising directly or indirectly out of:
1. Financial circumstances or insolvency; or
2. The insured person not being in possession of the required or valid or correct travel documents or visas unless they are lost or stolen; or
3. Carrier caused delays where the cost of the expenses are recoverable from the carrier; or
4. Any business or employment commitment or financial or contractual obligation of the insured person or any other person on whom the? Insured journey depends; or
5. Any change of plans or disinclination on the part of the insured person or any other person to travel on an insured journey; or
6. The inability of any tour operator or wholesaler to complete arrangements for any tour due to a deficiency in the required number of persons to commence any tour or travel; or
7. Defective or bad condition of the private motor vehicle planned to be used for the insured journey; or
8. Lock-out or prohibitive regulation by the court of any country; or
9. Adverse weather conditions at the destination; or
10. Unemployment or change of employment, other than Retrenchment.

SECTION 5 - BAGGAGE, TRADE SAMPLES, PERSONAL EFFECTS, TRAVEL DOCUMENTS, MONEY, CREDIT CARDS AND BAGGAGE DELAY

SECTION 5A - BAGGAGE, TRADE SAMPLES, PERSONAL EFFECTS, TRAVEL DOCUMENTS, MONEY AND CREDIT CARDS
1. Travel documents/credit card/travellers cheques fraud
The Company will pay the Insured Person’s legal liability for payment arising out of the unauthorised use of his travel documents (travel tickets, passports and visas), credit cards or traveller’s cheques following theft by any person other than his Relative or Travel Companion.
2. Travel documents/credit card/travellers cheques replacement
The Company will pay the non-recoverable cost of replacing the Insured Person’s travel documents (travel tickets, passports and visas), credit cards or traveller’s cheques should they be lost, stolen or damaged.
3. Money
The Company will pay for the Insured Person’s loss of cash, bank or currency notes, cheques, postal or money orders or other negotiable instruments as a result of theft during an Insured Journey. In respect of money secured for the purpose of the Insured Journey, cover shall commence at the time of collection from the bank or 72 hours prior to the start of the Insured Journey, whichever occurs first, and shall continue for 72 hours after termination of the Insured Journey or until deposited at the bank, whichever occurs first.
4. Property
The Company will pay for the accidental loss of, theft or damage to the Insured Person’s accompanying baggage, Personal Effects, portable business equipment (including computers and cellular phones) and business property (including trade samples, business papers, specifications, manuscripts and stationery for the cost of reproducing such documents but not for the research and development costs) that occurred during the Insured Journey.

Sum Insured
Except as provided for under Section 5B - Baggage Delay, the maximum amount the Company will pay for anyone item, set or pair of items, is 25% of the sum insured or the amount stated in the Schedule of Benefits, whichever is the greater, unless otherwise specified in the specific conditions relating to this section. A maximum of 25% of the sum insured stated on the Schedule of Benefits shall be paid in respect of claims for trade samples or money.
SECTION 5A - SPECIFIC CONDITIONS

1. It is a condition of payment that loss or damage attributable to theft, vandalism or loss or damage by carriers be reported to the local police or appropriate authority as soon as possible after discovery of the loss and that a written acknowledgement of the report be obtained.

2. A camera and/or video camera, its lenses and accessories shall be regarded as one item.

3. The repair or replacement cost of a cellular phone and any fittings or accessories (all deemed to be a single item) shall be limited US$100 per Insured Person.

4. A laptop, palmtop, notebook or similar personal computer, and any fittings or accessories including discs/storage mechanisms/carry cases, shall be deemed to be a single item and the repair or replacement cost shall be limited to 25% of the sum insured as stated on the Schedule of Benefits.

5. In respect of jewellery claims, original or certified copies of valuation certificates issued prior to the commencement of the Insured Journey are required. This condition is applicable to all jewellery including gifts and inherited items.

6. Contact lenses, prescription spectacles or sunglasses are limited to a maximum of US$25 per pair over and above any applicable Excess.

7. Any loss of credit cards, traveller’s cheques or travel documents must be reported within 24 hours to the issuing authority and the appropriate cancellation measures taken. The onus will be on the Insured Person to prove that the Company was not prejudiced in any way by late reporting.

8. Cash, documents and/or jewellery must be carried on the Insured Person or lodged in safety deposit at the time of loss.

9. Reasonable measures to save and recover baggage must have been taken by any Insured Person.

10. The Insured Person shall, in respect of property, Personal Effects, travel documents, money and credit cards which may become the subject of a claim: (a) exercise all reasonable care for the safety, security and supervision thereof at all times and must not leave property unattended in a public place or in any unlocked vehicle, room or building; (b) endeavour to minimise any loss; (c) not abandon any damaged property.

11. The basis of settlement for items purchased within the 12 months prior to the Insured Journey or whilst on the Insured Journey will be the replacement value of items determined at the Company’s discretion. The Company may choose to replace, repair or pay for the loss in cash. All items must be supported by proof of purchase.

12. To account for wear and tear the Company will pay a maximum of 75% of the replacement value for items purchased more than 12 months prior to the Insured Journey, decreasing thereafter at 10% per year from date of purchase.

SECTION 5A - SPECIFIC EXCLUSIONS

The Company will not be liable for:

1. Damage or loss arising from electrical or mechanical breakdown of any item; or
2. Damage to or replacement of any electronic data or software; or
3. Scratching or breakage of fragile or brittle items. This exclusion does not apply to photographic or video equipment, binoculars, spectacles or contact lenses; or
4. Damage or loss arising from normal wear and tear, decay, a defective feature of the object itself, destruction by moth or vermin, mould or fungus, insects, rodents, any process of cleaning, ironing, pressing, repairing, restoring or alteration. However, loss as a result of leaking liquid enclosed in the baggage is included; or
5. Baggage, Personal Effects, business property, travel documents or money shipped under any freight agreement, unaccompanied baggage or items sent
by postal or courier services or given to someone else other than a Travel Companion; or

6. loss, destruction or damage arising from confiscation or detention by customs or other officials or authorities or shortages due to errors, omissions or depreciation value; or

7. Loss, destruction or damage directly occasioned by pressure waves caused by aircraft or any other aerial devices travelling at sonic or supersonic speeds; or

8. Loss, destruction or damage caused by atmospheric or climatic conditions or any other gradually deteriorating cause; or

9. Loss of or damage to bonds, stamps, negotiable instruments, deeds, securities or any kind of bullion; or

10. Personal computers, cellular phones or any electronic equipment:
   a) Where theft or attempted theft occurs while such equipment is unattended other than when securely locked inside a building or securely locked out of sight inside a motor vehicle.
   b) Whilst carried on any conveyance unless carried by an Insured Person as personal cabin luggage.

   However, exclusion 1 O(a) shall not apply in circumstances where the Insured Person leaves such property temporarily unattended whilst on any Public Conveyance and takes all reasonable precaution to safeguard the property and has no option other than to leave the property temporarily unattended; or

11. Contractual obligations in relation to a cellular phone purchase; or

12. Any goods intended for sale or trade; or

13. Household furniture and household appliances, non-portable property, computer or electronic equipment unless acquired during the Insured Journey for personal use in the Insured Person’s Country of Residence. The Insured Person will be required to attach receipts for such items in the event of a claim; or

14. Loss of sports equipment and tools and/or damage of sports equipment and tools whilst in use.

SECTION 5B - BAGGAGE DELAY
The Company will reimburse the Insured Person for reasonable essential expenses incurred, and for such amount incurred above the Excess, for the emergency replacement of essential items if his baggage is delayed, misdirected or temporarily misplaced by a carrier.

SECTION 5B - SPECIFIC CONDITIONS
1. Written proof of delay from the transport provider must be submitted with any claim and the Company’s liability is subject to it receiving original receipts for the essential expenses incurred.

2. The baggage delay must exceed the Excess.

3. Confiscation or requisition by customs or other government authority cannot form the basis of a claim for loss or expenses.

4. Claims in respect of essential clothing or requisites purchased as a result of delayed baggage will only be considered if items have been purchased within 4 days after the actual arrival time at the intended destination.

5. If baggage appears to be delayed or lost at the destination airport, the Insured Person must formally notify the relevant carrier airline immediately.

SECTION 6 - PERSONAL LIABILITY
The Company will pay all damages, compensation and legal expenses for which the Insured Person becomes legally liable as a result of his actions causing:

1. Injury, including resultant death, of another person.

2. Loss of or damage to property
SECTION 6 - SPECIFIC CONDITIONS

1. It is a condition of payment that the Insured Person not admit fault or liability to any other person without the Company’s prior written consent.
2. No offer, promise, payment or indemnity may be made by the Insured Person without the Company’s prior written consent.
3. The Insured Person must give the Company written notice with full particulars of an event that may give rise to a claim within 30 days of the conclusion of an Insured Journey.
4. Every letter, writ, summons and process must be forwarded to the Company as soon as possible.
5. The Company is entitled to take over the defence and settlement of claim in the name of the Insured Person for the Company’s benefit. The Company shall have full discretion in the conduct of any proceedings and settlement of the claim.
6. The Company may at any time pay the Insured Person the amount for which a claim can be settled less any damages already paid. The Company will then be under no further liability other than for costs and expenses incurred prior to making such payment.
7. No indemnity will be provided for legal liability arising from Injury or loss as a result of any wilful or malicious act of the Insured Person.

SECTION 6 - SPECIFIC EXCLUSIONS

The Company will not pay damages, compensation or legal expenses in respect of any liability directly or indirectly arising out of or in connection with:
1. Injury to the Insured Person or to any member of his family ordinarily residing with him;
2. Injury to the Insured Person or his employees arising out of or in the course of employment; or
3. Loss of or damage to property owned by or in control of the Insured Person or any member of his family ordinarily residing with him; or
4. The ownership, possession or use by or on behalf of the Insured Person of any caravan, mechanically propelled vehicle (other than golf carts and motorised wheelchairs), aircraft or other aerial device, hovercraft (other than hand-propelled or sailing craft in territorial waters) or animals;
5. Loss of or damage to property or Injury arising out of the Insured Person’s profession, business or trade, or out of professional advice given by him; or
6. Any contract unless such liability would have arisen in the absence of that contract; or
7. Judgements which are not in the first instance either delivered by or obtained from a court of competent jurisdiction within Kenya or the country in which the event occurred giving rise to the Insured Personal liability; or
8. Any claim for fines, penalties, punitive, exemplary, aggravated or vindictive damages.

SECTION 7 - HIJACK

SECTION 7 - HIJACK - PUBLIC CONVEYANCE

The Company will pay the benefit in the event of the unlawful seizure or wrongful exercise of control of a Public Conveyance (including the crew thereof) in which the Insured Person is travelling.

SECTION 8 - STUDY FEES ONLY APPLICABLE IF STUDENT COVER IS SELECTED.

In the event of the insured person being hospitalised for more than 60 consecutive days or in the case of the death of his relative, he returns to his country of Residence for a period of 60 consecutive days or more the Company will reimburse his study allowances for the coming year. This is limited to the enrolment fee and the cost of housing to the maximum stated in the schedule of benefit.
<table>
<thead>
<tr>
<th>Section</th>
<th>The schedule of compensation applicable under each Section of this Policy for each insured Person during each Period of Travel</th>
<th>Insured Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Emergency Medical and related Expenses</td>
<td>Medical Expenses – Injury or illness</td>
<td>$200,000</td>
</tr>
<tr>
<td></td>
<td>Excess (applicable to outpatients)</td>
<td>$200</td>
</tr>
<tr>
<td></td>
<td>Dental Expenses – injury illness</td>
<td>Included in medical Expenses</td>
</tr>
<tr>
<td></td>
<td>Optical Expenses – injury illness</td>
<td>Included in medical Expenses</td>
</tr>
<tr>
<td></td>
<td>Follow-up Treatment Expenses</td>
<td>$500</td>
</tr>
<tr>
<td>2. Personal Accident</td>
<td>Accidental Death or Permanent Disability</td>
<td>$25,000</td>
</tr>
<tr>
<td>3. AIG Travel</td>
<td>Cash Advances</td>
<td>Assistance Only</td>
</tr>
<tr>
<td></td>
<td>Consular referral</td>
<td>Assistance Only</td>
</tr>
<tr>
<td></td>
<td>Emergency Accommodation &amp; Travel arrangements</td>
<td>Assistance Only</td>
</tr>
<tr>
<td></td>
<td>Transmission of Urgent messages</td>
<td>Assistance Only</td>
</tr>
<tr>
<td></td>
<td>Accompanying Family Member</td>
<td>$3,500</td>
</tr>
<tr>
<td></td>
<td>Return of Accompanying Children</td>
<td>$3,500</td>
</tr>
<tr>
<td></td>
<td>Return of Travel Companion</td>
<td>$3,500</td>
</tr>
<tr>
<td></td>
<td>Legal Assistance Abroad</td>
<td>$1,000</td>
</tr>
<tr>
<td></td>
<td>Return of Mortal Remains / Burial Expenses</td>
<td>$20,000</td>
</tr>
<tr>
<td></td>
<td>Coffin Expenses</td>
<td>$750</td>
</tr>
<tr>
<td>4. Cancellation &amp; Curtailment</td>
<td>Cancellation &amp; Curtailment</td>
<td>$1,500</td>
</tr>
<tr>
<td></td>
<td>Excess</td>
<td>$150</td>
</tr>
<tr>
<td>5. Baggage, Trade Samples, Personal Effects, Travel Documents, Money &amp; Credit Cards</td>
<td>Loss of theft of baggage/trade samples (Single Item Limit:25% of Benefit Amount)</td>
<td>$1,000</td>
</tr>
<tr>
<td></td>
<td>Loss of Theft of Cash and/or Travel Documents</td>
<td>$150</td>
</tr>
<tr>
<td></td>
<td>Baggage Delay - After 6 hours</td>
<td>$150</td>
</tr>
<tr>
<td>6. Personal Liability Abroad</td>
<td>Bodily injury</td>
<td>$100,000</td>
</tr>
<tr>
<td></td>
<td>Excess</td>
<td>$150</td>
</tr>
<tr>
<td></td>
<td>Material Damage</td>
<td>$100,000</td>
</tr>
<tr>
<td></td>
<td>Excess</td>
<td>$150</td>
</tr>
<tr>
<td>7. Hijack Public Conveyance</td>
<td>Hijack - After 12hours</td>
<td>$150</td>
</tr>
<tr>
<td></td>
<td>Accumulation Limits</td>
<td>$200,000</td>
</tr>
</tbody>
</table>
### Schedule of Benefits - Inbound Travel Insurance

<table>
<thead>
<tr>
<th>SECTION OF COVER</th>
<th>BENEFITS</th>
</tr>
</thead>
<tbody>
<tr>
<td>SECTION 1 – EMERGENCY MEDICAL EXPENSES</td>
<td></td>
</tr>
<tr>
<td>SECTION 1A – Emergency Medical Expenses</td>
<td>$100,000</td>
</tr>
<tr>
<td>SECTION 1B – Dental Expenses</td>
<td>$1,000</td>
</tr>
<tr>
<td>SECTION 1C – Out Patient Prescription Drugs</td>
<td>$250</td>
</tr>
<tr>
<td>Excess for Out Patient Treatment</td>
<td>$50</td>
</tr>
<tr>
<td>SECTION 2 – AIG Travel</td>
<td></td>
</tr>
<tr>
<td>SECTION 2A – ASSISTANCE SERVICES</td>
<td></td>
</tr>
<tr>
<td>- Cash advances</td>
<td>Assistance Only</td>
</tr>
<tr>
<td>- Consular referral</td>
<td>Assistance Only</td>
</tr>
<tr>
<td>- Emergency Travel &amp; Accommodation Arrangements</td>
<td>Assistance Only</td>
</tr>
<tr>
<td>- Transmission of Urgent Messages</td>
<td>Assistance Only</td>
</tr>
<tr>
<td>SECTION 2B – Return of Mortal Remains/Burial Expenses</td>
<td>Real Expense up Medical Expenses Limit</td>
</tr>
<tr>
<td>SECTION 2C – Coffin Expenses</td>
<td>$1,000</td>
</tr>
<tr>
<td>SECTION 2D – Medical Evacuation, Repatriation or Transport to Medical Centre Expenses</td>
<td>$100,000</td>
</tr>
<tr>
<td>SECTION 3 – PERSONAL ACCIDENT</td>
<td></td>
</tr>
<tr>
<td>SECTION 3A – DEATH</td>
<td>$25,000</td>
</tr>
<tr>
<td>ACCUMULATION LIMIT</td>
<td>$100,000</td>
</tr>
<tr>
<td>ANY ONE LIFE LIMIT</td>
<td>$100,000</td>
</tr>
</tbody>
</table>

---

### Schedule of Benefits - World Student Travel Insurance

<table>
<thead>
<tr>
<th>SECTION OF COVER</th>
<th>BENEFITS</th>
</tr>
</thead>
<tbody>
<tr>
<td>SECTION 1 – MEDICAL AND RELATED EXPENSES</td>
<td></td>
</tr>
<tr>
<td>Section 1A: Medical Expenses – Illness or Injury</td>
<td>$60,000</td>
</tr>
<tr>
<td>Excess Out Patient Treatment</td>
<td>$200</td>
</tr>
<tr>
<td>Section 1B: Dental Expenses – Illness</td>
<td>$365</td>
</tr>
<tr>
<td>Section 1B: Dental Expenses – Injury</td>
<td>Incl. in Emergency Med. Exp.</td>
</tr>
<tr>
<td>Section 1C: Optical Expenses – Illness</td>
<td>$365</td>
</tr>
<tr>
<td>Section 1C: Optical Expenses – Injury</td>
<td>Incl. in Emergency Med. Exp.</td>
</tr>
<tr>
<td>Section 1D: Follow up Treatment</td>
<td>$500</td>
</tr>
<tr>
<td>Section 1E: Hospital Cash [40 per day up to a max of 5 days]</td>
<td>$500</td>
</tr>
<tr>
<td>SECTION 2 – PERSONAL ACCIDENT</td>
<td></td>
</tr>
<tr>
<td>Section 2A: Death and Disability</td>
<td>$6,000</td>
</tr>
<tr>
<td>SECTION 3 – AIG Travel</td>
<td></td>
</tr>
<tr>
<td>Section 3A: Assistance Services</td>
<td>Assistance only</td>
</tr>
<tr>
<td>Section 3B: Accompanying Family Member</td>
<td>$3,500</td>
</tr>
<tr>
<td>Section 3C: Return of Travel Companion</td>
<td>$3,500</td>
</tr>
<tr>
<td>Section 3D: Legal Assistance Abroad</td>
<td>$1,000</td>
</tr>
<tr>
<td>Section 3E: Return of Mortal Remains/Burial Expenses</td>
<td>$20,000</td>
</tr>
<tr>
<td>Section 3F: Coffin Expenses</td>
<td>$750</td>
</tr>
<tr>
<td>Section 3G: Medical Evacuation, Repatriation of Transport to Medical Centre Expenses</td>
<td>$80,000</td>
</tr>
<tr>
<td>SECTION 4 – CANCELLATION OR CURTAILMENT</td>
<td></td>
</tr>
</tbody>
</table>
Section 4A: Cancellation

$ 1,400

Excess $ 200

Section 4B: Curtailment

$1,400

Excess $ 200

SECTION 5 – BAGGAGE, PERSONAL EFFECTS, TRAVEL DOCUMENTS, CREDIT CARDS AND BAGGAGE DELAY

Section 5A: Baggage, Personal Effects, Travel Documents, Money Credit Cards:

- Loss / Theft of Baggage [single item limit: 25% of benefit amt.] $ 1,000
  Excess $ 500
- Loss / Theft of cash and / or travel documents $ 100
  Excess $ 50

Section 5B: Baggage Delay

Excess 12 Hours $ 100

SECTION 6 – PERSONAL LIABILITY

Bodily Injury $ 50,000

Material Damage $ 50,000

Excess $ 150

SECTION 7 – HIJACK

Section 7: Hijack – Public Conveyance $ 200

Excess 12 Hours

SECTION 8 – STUDY FEES

Reimbursement of Study Fees $ 5,000

Schedule of Benefits

### Schengen Travel Insurance

<table>
<thead>
<tr>
<th>Section</th>
<th>The schedule of compensation applicable under each Section of this Policy for each insured Person during each Period of Travel</th>
<th>Insured Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Emergency Medical and related Expenses</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Medical Expenses – Injury of illness                                                            $ 75,000</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Excess (applicable to outpatients)                                                              $ 100</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Dental Expenses – injury Illness                                                                 $ 365</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Included in medical Expenses</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Optical Expenses – injury Illness                                                               $ 365</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Included in medical Expenses</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Follow-up Treatment in country of residence - Illness/injury                                    $ 500</td>
<td></td>
</tr>
<tr>
<td>AIG Travel</td>
<td>Section 2A- Assistance Services</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Cash Advances Assistance Only</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Consular referral Assistance Only</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Emergency Accommodation &amp; Travel arrangements Assistance Only</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Transmission of Urgent messages Assistance Only</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Accompanying Family Member $ 3,500</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Return of Accompanying Children $ 3,500</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Return of Travel Companion $ 3,500</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Legal Assistance Abroad Assistance Only</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Return of Mortal Remains / Burial Expenses $ 20,000</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Coffin Expenses $ 750</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Medical Evacuation &amp; Repatriation $ 20,000</td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>Accumulation Limits</strong> $ 75,000</td>
<td></td>
</tr>
</tbody>
</table>
### THERE ARE 25 SCHENGEN COUNTRIES

- Austria
- Latvia
- France
- Lithuania
- Belgium
- Luxembourg
- Czech Republic
- Malta
- Denmark
- Netherlands
- Estonia
- Norway
- Finland
- Poland
- Germany
- Portugal
- Hungary
- Slovakia
- Iceland
- Slovenia
- Italy
- Spain
- Greece
- Sweden
- Switzerland

### Schedule of Benefits

#### Incountry Travel Insurance

<table>
<thead>
<tr>
<th>Benefit</th>
<th>Revised benefits</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Medical &amp; Related Expenses</strong></td>
<td></td>
</tr>
<tr>
<td>Medical Expenses - Accident Only</td>
<td>KES 500,000</td>
</tr>
<tr>
<td>Excess</td>
<td>KES 3,500</td>
</tr>
<tr>
<td>Medical Evacuation, Repatriation or Transport to Medical Centre Expenses</td>
<td>KES 300,000</td>
</tr>
<tr>
<td>Hospital Confinement benefit KES 2500 per day)</td>
<td>KES 75,000</td>
</tr>
<tr>
<td><strong>Personal Accident</strong></td>
<td></td>
</tr>
<tr>
<td>24 Hour</td>
<td>KES 750,000</td>
</tr>
</tbody>
</table>

**AIG Assist**

- Assistance services
- Return of Mortal Remains or Burial Expenses: KES 50,000
- Coffin expenses: KES 22,500

#### Baggage, Money, Credit Cards & Travelers Cheques and Baggage Delay

- Theft or Damage of Baggage: KES 20,000
- Baggage Single Item Limit - Theft or Damage: KES 7,500
- Excess: KES 2,500
- Sublimit - Contact lenses, prescription spectacles or sunglasses (Over and above excess): KES 5,000
- Sublimit - Cellular phones/fittings/accessories (Over and above excess): KES 5,000

**Personal Liability**

- KES 2,250,000
- Excess: KES 7,500
- Accumulation Limit: KES 2,250,000
## Schedule of Benefits

### Seniors Travel Insurance

<table>
<thead>
<tr>
<th>Section 1 - Medical &amp; Related Expenses</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Medical Expenses</td>
<td>$75,000</td>
</tr>
<tr>
<td>Excess</td>
<td>$200</td>
</tr>
<tr>
<td>Medical Evacuation, Repatriation or Transport to Medical Centre Expenses</td>
<td>$25,000</td>
</tr>
<tr>
<td>Optical Expenses - Bodily Injury Included</td>
<td></td>
</tr>
<tr>
<td>- Illness</td>
<td>$500</td>
</tr>
<tr>
<td>Dental Expenses - Bodily Injury Included</td>
<td></td>
</tr>
<tr>
<td>- Illness</td>
<td>$500</td>
</tr>
<tr>
<td>Follow up Treatment in Kenya</td>
<td>$500</td>
</tr>
<tr>
<td>Accidental Death</td>
<td>$10,000</td>
</tr>
<tr>
<td>Cash Assistance</td>
<td>Assistance services</td>
</tr>
<tr>
<td>Consular referral</td>
<td>Assistance services</td>
</tr>
<tr>
<td>Emergency Travel &amp; Accommodation Arrangements</td>
<td>Assistance services</td>
</tr>
<tr>
<td>Transmission of Urgent Messages</td>
<td>Assistance services</td>
</tr>
<tr>
<td>Lost Passport Assistance</td>
<td>Assistance services</td>
</tr>
<tr>
<td>Visit by a family member</td>
<td>$3,500</td>
</tr>
<tr>
<td>Return of Children</td>
<td>$3,500</td>
</tr>
<tr>
<td>Return of Travel Companion</td>
<td>$3,500</td>
</tr>
<tr>
<td>Legal Assistance Abroad</td>
<td>$1,000</td>
</tr>
<tr>
<td>Motoring bail bond (advance only)</td>
<td></td>
</tr>
<tr>
<td>Return of Mortal Remains or Burial Expenses</td>
<td>$20,000</td>
</tr>
<tr>
<td>Coffin expenses</td>
<td>$1,000</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Section 4 - Cancellation or Curtailment</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Cancellation</td>
<td>$1,500</td>
</tr>
<tr>
<td>Curtailment</td>
<td>$1,500</td>
</tr>
<tr>
<td>Excess</td>
<td>$50</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Section 5 - Baggage, Money, Credit Cards &amp; Travelers Cheques and Baggage Delay</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Theft or Damage of Baggage</td>
<td>$1,000</td>
</tr>
<tr>
<td>Baggage Single Item Limit - Theft or Damage</td>
<td>25% of benefit limit</td>
</tr>
<tr>
<td>Accidental Loss of Baggage</td>
<td>$1,000</td>
</tr>
<tr>
<td>Baggage Single Item Limit - Accidental Loss</td>
<td>25% of benefit limit</td>
</tr>
<tr>
<td>Excess</td>
<td>$50</td>
</tr>
<tr>
<td>Sublimit - Contact lenses, prescription spectacles or sunglasses (Over and above excess)</td>
<td>25% of benefit limit</td>
</tr>
<tr>
<td>Sublimit - Cellular phones/fittings/accessories (Over and above excess)</td>
<td>$200</td>
</tr>
<tr>
<td>Theft of Money and Credit Cards &amp; Travelers Cheques (Over and above excess)</td>
<td>$150</td>
</tr>
<tr>
<td>Single item limit - Theft of Money and Credit Cards &amp; Travelers Cheques</td>
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</tr>
<tr>
<td>Cheques (Over and above excess)</td>
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<tr>
<td>Excess</td>
<td>$70</td>
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<tr>
<td>Baggage Delay (delayed for more than 6 hours)</td>
<td>$150</td>
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<table>
<thead>
<tr>
<th>Section 9 - Travel Delay &amp; Missed Connection</th>
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<tbody>
<tr>
<td>Travel Delay (delayed for more than 4 hours)</td>
<td>$200</td>
</tr>
<tr>
<td>Personal Liability</td>
<td>$100,000</td>
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<tr>
<td>Excess</td>
<td>$150</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Section 10 - Motor Hijack</th>
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</thead>
<tbody>
<tr>
<td>Personal Accident</td>
<td>$500</td>
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</table>

<table>
<thead>
<tr>
<th>Section 11 - Hijack - After 12 hours</th>
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</thead>
<tbody>
<tr>
<td>Accumulation Limit</td>
<td>$100,000</td>
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