

Policy

SmartTraveller

Policy coverage attaching to and forming part of Policy of Insurance

Welcome to your AXA General Insurance Hong Kong Limited **SmartTraveller** Insurance Policy. Your Policy consists of

- the proposal form (if any)
- the Policy wording in this jacket
- the Policy Schedule/Certificate of Insurance

Your Policy Schedule/Certificate of Insurance shows

- details of your cover
- the period of insurance
- any special terms that may apply to your Policy

Following payment of the premium stated in the Policy Schedule/Certificate of Insurance We will, in the event of Accident, Injury or loss happening during the period of insurance, provide insurance as described in the following pages for those Sections you have chosen.

Please read this jacket together with your Policy Schedule/Certificate of Insurance to make sure you know what cover is provided.

Definitions

Certain words in the Policy have specific meanings. These words have the same meaning wherever they are used in the Policy or the Policy Schedule/Certificate of Insurance or subsequently endorsed hereon. These are given below or defined at the beginning of the appropriate Section.

Accident – means a sudden unforeseen and fortuitous event.

Child/Children – means dependent and unmarried child/children who is/are aged between 30 days and under 18 years old on the commencement date of this Policy as named in the Policy Schedule/Certificate of Insurance.

Close Business Partner – means a business companion who travels with the Insured Person for the same business purpose, and whose presence is necessary for the Insured Person's business.

Compulsory Quarantine – means the Insured Person is being confined in an isolated ward of a Hospital or an isolated site appointed by the government for at least 24 hours and continuously stays in there until discharged from the quarantine.

Family – means Insured Person, his/her spouse and Children (irrespective of the number) travelling with the Insured Person and/or his/her spouse for the entire period.

Hong Kong – means the Hong Kong Special Administrative Region.

Hospital – An establishment which meets all the following requirements:

- holds a license as a Hospital (if licensing is required in the state or governmental jurisdiction);
- operates primarily for the reception, care and treatment of sick, ailing or injured persons as in-patients;
- provides 24-hour a day nursing service by registered or graduated nurses;
- has a staff one or more licensed physicians available at all times;
- provides organized facilities for diagnosis and major surgical facilities; and
- is not primarily a clinic, nursing, rest or convalescent home or similar establishment, a place for alcoholics or drug addicts.

Immediate Family Member – means the Insured Person's spouse, parent, parent-in-law, grandparent, grandparent-in-law, son, daughter, brother, sister, grandchild or legal guardian.

Infectious Disease – means any kinds of Infectious Disease which are publicly announced and require quarantine by the government.

Injury – means bodily Injury sustained by an Insured Person and caused solely and directly by an Accident and does not include any illness or naturally occurring medical conditions or degenerative process.

Insured/Policyholder – means individual or business entity/company who owns the insurance Policy.

Journey – means travel originating from Hong Kong and ceasing when the Insured Person returning and re-entering into Hong Kong.

Loss of Hearing – means Permanent irrecoverable Loss of Hearing rendering the Insured Person absolutely deaf in both ears irremediable by surgical or other means of treatment.

Limb – means refers to a hand or foot.

Loss of Limb – means complete severance at or above the wrist or ankle joint or the total and Permanent functional disablement of an entire hand, arm, foot or leg.

Loss of Sight – means the total and irrecoverable Loss of all sight of an eye rendering the Insured Person absolutely blind in that eye beyond remedy by surgical or other treatment.

Loss of Speech – means the disability in articulating any three of the four sounds which contribute to the speech such as the Labial sounds, the Alveololabial sounds, the Palatal sounds and the Velar sounds or total loss of vocal cord or damage of speech centre in the brain resulting in Aphasia rendering the Insured Person absolutely Loss of Speech beyond remedy by surgical or other treatment.

Loss of Use – means total functional disablement and is treated like the total loss of said Limb or organ.

Member Insured/Insured Person – means the Insured Person(s) named in Policy Schedule/Certificate of Insurance. In the case where the Insured is a business entity/company, they are to be interpreted as "Insured Employee(s)" so long as they are named in the Policy Schedule/Certificate of Insurance.

Permanent – means lasting 12 consecutive months from the date of Accident and at the expiry of that period being beyond hope of improvement.

Permanent Total Disablement – means when as the result of Injury and commencing within 12 consecutive months from the date of the Accident, the Insured Person is totally and permanently disabled and prevented from engaging in or attending any business or occupation. If the Insured Person has no employment or occupation at the time of Injury, Permanent Total Disablement means the inability to perform to all of the daily activities in his/her daily life. Provided such disability has continued for a period of 12 consecutive months and certified by a Qualified and Licensed/Registered Medical Practitioner to be total, continuous and Permanent for the remainder of the Insured Person's life.

Public Common Carrier – means any mechanically propelled conveyance operated by a company or an individual licensed to carry passengers for hire which include aeroplane, bus, coach, ferry, hovercraft, hydrofoil, ship, train, tram or underground train only.

Qualified and Licensed/Registered Medical Practitioner – means a medical practitioner qualified by a medical degree and duly licensed or registered to practice medicine and who, in rendering such treatment (surgery or medical procedures for the sole purpose of cure or relief of Injury), is practicing within the scope of his or her licensing and training in the geographical area of practice.

Travel Companion – means the person who committed or arranged the travel booking or reservation together with the Insured Person and accompanied the Insured Person for the whole Journey and is also insured with Us under the same Journey other than the tour guide or the tour member.

We, Us or Our – means AXA General Insurance Hong Kong Limited.

Geographical Limits

Cover is provided on worldwide basis.

This Policy is only valid for travel originating from Hong Kong, unless specify otherwise under the Policy Schedule/Certificate of Insurance.

Operation of Insurance

- For all Sections (except for Section 6 – Personal Money and Travel Documents and Section 9 – Loss of Deposit or Cancellation of Trip stated as below), Journey refers to the period of insurance shown in the Policy Schedule/Certificate of Insurance. It commences when the Insured Person leaves his/her place of residence or business in Hong Kong (whichever is the earlier) to commence the Journey until the time of return to his/her place of residence or business in Hong Kong (whichever is the later) on completion of the Journey. In any event, unless specified otherwise, cover does not commence more than 24 hours prior to booked departure time and shall cease (i) upon the expiry of the period of insurance as specified in the Policy Schedule or (ii) 24 hours after booked return time to Hong Kong, or arrival at final destination, whichever is the earlier.
- For Section 6 – Personal Money and Travel Documents, Journey commences (i) at the time when the Policy Schedule/Certificate of Insurance is issued or (ii) 24 hours before the period of insurance shown in the Policy Schedule/Certificate of Insurance, whichever is the later.
- For Section 9 – Loss of Deposit or Cancellation of Trip, Journey is effective immediately the Policy Schedule/Certificate of Insurance is issued.
- For Single Journey, cover is provided up to a maximum of 184 days.
- For Annual Cover, cover is provided up to a maximum of 90 days with policy limits applied to each Journey, irrespective of the number of Journeys that are made within the policy period. Covers end at (i) the last day of the period of insurance or (ii) the ending of Insured Person's last Journey provided the Journey is started within the period of insurance, whichever is the later.

Memorandum for One Way Cover (applicable to Single Journey Only)

For Insured Person not returning to Hong Kong, cover terminates no later than 7 days from scheduled time of arrival at the country of final destination or expiry of the original declared period of insurance whichever is the earlier.

Memorandum for Automatic 10 Days Extension (applicable to Single Journey Only)

This Insurance will be automatically extended for a maximum period of 10 days without additional premium charged for such extension in the event that the Insured Person is unavoidably delayed in the course of the scheduled itinerary which was stipulated prior to departure.

Memorandum for Insured Person Aged below 18

For any Insured Person aged below 18 and paying the full adult premium, the maximum limit per Insured Person under Section 1 will be increased to 100% of item (a) of the selected plan; and the accidental death benefit under Section 3 will be limited to 50% of the selected plan, and not as originally stipulated in Provisions (i) under Section 3.

安盛保險有限公司
AXA General Insurance Hong Kong Limited

「卓越」優遊樂
SmartTraveller Insurance

24 小時全球緊急援助熱線
24-hour Worldwide Emergency Assistance Hotline

如需緊急支援，請致電
For immediate assistance, please call

(852) 2861 9285

Section 1 – Medical and Related Expenses

	VIP	Classic
Maximum Limit per Insured Person		
(a) Insured Person aged up to 70	\$1,000,000	\$500,000
(b) Insured Person aged over 70	\$500,000	\$250,000
(c) Insured Child	\$250,000	\$125,000

We will pay

- (1) the incurred medical, Hospital and treatment expenses including the cost of dental treatment (as a result of Accident only), necessarily incurred outside Hong Kong, within 12 consecutive months as from the date of incident giving rise to the claim as a direct result of accidental bodily Injury sustained or sickness contracted by the Insured Person during the Journey.

(N.B. Chinese bone-setting, acupuncture, physiotherapy or chiropractic treatment are subject to an aggregate limit of \$3,000 and a per visit per day limit of \$200)

- (2) the incurred reasonable additional accommodation and travelling expenses (confined to economy class) incurred for a relative or friend required on medical advice to travel to or remain behind with the Insured Person as a result of the Insured Person's hospitalization.

	VIP	Classic
Sub-limit per Insured Person	\$40,000	\$20,000

- (3) the incurred reasonable additional accommodation and travelling expenses (confined to economy class) incurred to return dependent Children of the Insured Person who are on the same Journey as Insured Person back to the Insured Person's place of residence in Hong Kong who are left unattended as a result of the Insured Person's hospitalization.

	VIP	Classic
Sub-limit per Insured Person	\$40,000	\$20,000

- (4) the incurred guarantee of Hospital admittance deposit in the event of accidental bodily Injury sustained or sickness contracted by the Insured Person during the Journey and the Insured Person is admitted into a Hospital.

	VIP	Classic
Sub-limit per Insured Person	\$40,000	\$40,000

- (5) the reasonable costs incurred by the Insured Person in engaging the services of a local translator/interpreter in the Hospital where the Insured Person is confined caused by accidental bodily Injury or sickness, which occurred or was contracted abroad during the Journey, subject to the period of confinement exceeding 24 hours.

	VIP	Classic
Sub-limit per Insured Person	\$5,000	\$5,000
Limit per day	\$500	\$500

- (6) the reasonable additional accommodation and travelling expenses necessarily incurred by the Insured Person in reverting to his/her original travel schedule/itinerary and/or rejoining his/her original Travel Companions following an interruption or disruption of that schedule/itinerary caused by accidental bodily Injury or sickness, which occurred or was contracted abroad during the Journey.

	VIP	Classic
Sub-limit per Insured Person	\$5,000	\$3,000

- (7) the necessary medical, Hospital and treatment expenses (including the cost of dental treatment as a result of Accident only, a private ambulance or professional home-nursing fees) reasonably incurred by the Insured Person in Hong Kong within 3 consecutive months after the Insured Person's return from abroad and such expenses having resulted from accidental bodily Injury or sickness which occurred or was contracted abroad during the Journey and which necessitated medical consultation whilst abroad.

	VIP	Classic
Sub-limit per Insured Person due to accidental bodily Injury	100% of maximum limit of Section 1	
Sub-limit per Insured Person due to sickness	10% of maximum limit of Section 1	

(N.B. Chinese bone-setting, acupuncture, physiotherapy or chiropractic treatment are subject to an aggregate limit of \$3,000 and a per visit per day limit of \$200)

We will also pay:

- (8) a daily hospital cash benefit to any Insured Person who is admitted to Hospital outside Hong Kong for more than 24 hours as a result of an accidental bodily Injury or sickness which occurred or was contracted during the Journey. This benefit is also payable to any Insured Person who, upon return to Hong Kong, is admitted to Hospital in Hong Kong for more than 24 hours as a follow-up treatment.

	VIP	Classic
Sub-limit per Insured Person	\$5,000	\$3,000
Limit per day	\$500	\$300

- (9) a daily Compulsory Quarantine cash benefit to any Insured Person in the event such Insured Person is being quarantined compulsorily due to contraction of Infectious Disease or suspicion of being contracted of Infectious Disease outside Hong Kong during the Journey or within 7 days upon completion of the Journey and returning to Hong Kong. This benefit can only be utilized once during any one Journey.

PROVISIONS

- The Compulsory Quarantine must be executed by local authorized health department or any regulatory authority. Voluntary quarantine and/or home quarantine shall be excluded.
- We will pay the daily benefit on each full 24 hours of Compulsory Quarantine.
- This benefit is only payable when the Infectious Disease has been rated at phase 5 or above under the Epidemic and Pandemic Alert and Response by the World Health Organization on or before the first day of Compulsory Quarantine of the Insured Person during the Journey, or the Hong Kong Government has activated the Government's Preparedness Plan for Influenza Pandemic to the highest level – Emergency Response Level on or before the first day of Compulsory Quarantine of the Insured Person in Hong Kong.
- No benefit shall be payable if the planned destination(s) has been declared as an infected area on or before the departure date of the Journey.

	VIP	Classic
Sub-limit per Insured Person	\$5,600	\$3,500
Limit per day	\$800	\$500

(N.B. An Insured Person cannot claim under both benefit (8) and (9) for the same event)

- (10) the satellite phone call expenses reasonably incurred while on board a cruise during the Journey as a result of serious accidental bodily Injury sustained or serious illness contracted by the Insured Person or his/her Travel Companion which prevents the Insured Person from continuing the Journey, provided that the Insured Person must return directly to Hong Kong following such interruption.

EXCLUDING

- failure to furnish an official receipt issued by the satellite phone service provider as proof of satellite phone call expenses incurred by the Insured Person.
- failure to obtain and provide a written report from the Qualified and Licensed/Registered Medical Practitioner certifying the serious bodily Injury or serious illness suffered by the Insured Person or his/her Travel Companion whilst on board the cruise.
- such expense is covered by any other existing insurance scheme, government program, or which will be paid or refunded by a cruise, hotel, Public Common Carrier, travel agency or any other provider of travel and/or accommodation or such expenses is already included in the cost of a schedule Journey.
- any circumstances leading to the disruption of his/her Journey known to have existed on or before the application date of this Policy (for Single Journey) or either before (i) the application date of this Policy or (ii) the date of booking the scheduled Journey (for Annual Cover).

	VIP	Classic
Sub-limit per Insured Person	\$3,000	\$1,500

EXTENSIONS

It is extended to cover

- any additional travelling expenses (subject to a proof of receipt) up to a maximum of \$500 incurred by the Insured Person for the purpose of seeking medical treatment in an overseas Hospital if the Insured Person suffers from accidental bodily Injury or sickness during the Journey.
- any incurred necessary medical expenses charged by a Qualified and Licensed/Registered Medical Practitioner in Hong Kong within 3 consecutive months for the medical treatment even if the Insured Person has not incurred any medical expenses overseas, provided that the Insured Person contracted the Infectious Disease during the Journey and the Qualified and Licensed/Registered Medical Practitioner's diagnosis proved that the contraction happened during the Journey and the contraction is confirmed within 7 days after the Insured Person returns to Hong Kong. The total amount payable shall not exceed the sub-limit set under (7) stated as above.

EXCLUDING

- Treatment or aid obtained in Hong Kong (except as specifically provided for in benefit (7), (8), (9) and extension (b) above).
- Surgery or medical treatment which, in the opinion of the Qualified and Licensed/Registered Medical Practitioner treating the Insured Person, can be reasonably delayed until the Insured Person's return to Hong Kong or arrival in country of final destination for Insured Persons not returning to Hong Kong.
- The additional cost of single or private room accommodation at a Hospital, clinic or nursing home, except where the Qualified and Licensed/Registered Medical Practitioner treating the Insured Person deems it necessary for the Insured Person to occupy such accommodation.
- Medical consultation or treatment (other than Chinese bone-setter, acupuncturist, physiotherapy or chiropractic), not received from local Qualified and Licensed/Registered Medical Practitioner.
- Any treatment provided by Chinese bone-setter, acupuncturist, physiotherapy or chiropractic who is the Insured Person himself/herself or a relative of the Insured Person or Insured Person's Immediate Family Members.

Section 2 – Worldwide Emergency Assistance Service

	VIP	Classic
Maximum Limit per Insured Person	Fully Covered	Fully Covered

The services described in this Section must be necessitated by a medical emergency and coordinated by an assistance company appointed by Us (the "Assistance Company").

(1) 24-Hour Emergency Assistance Hotline Service

A 24-hour emergency assistance hotline service is operated for the benefit of Insured Person so that, in the event of an emergency medical problem or situation covered herein, help and advice will be given.

(2) Emergency Medical Evacuation

If the local medical services are inadequate or not available and the medical condition warrants emergency evacuation to another place, the Assistance Company will arrange and We will pay the incurred cost for:

- emergency transport include air ambulance to the nearest and most appropriate Hospital or medical centre available to the nature of the Insured Person's accidental bodily Injury or sickness suffered; and
- medical attendants to accompany the Insured Person enroute on the advice and/or direction of the attending Qualified and Licensed/Registered Medical Practitioner.

(3) Repatriation/Repatriation of Mortal Remains

We will pay for services arranged by the Assistance Company in respect of:

- extra costs for economy airfare incurred when the Insured Person suffers a sickness or accidental bodily Injury such that the Insured Person must fly to Hong Kong immediately on the written advice of a Qualified and Licensed/Registered Medical Practitioner.
- extra costs for economy airfare incurred for a Qualified and Licensed/Registered Medical Practitioner to accompany the Insured Person on the written advice of a Qualified and Licensed/Registered Medical Practitioner.
- reasonable charges in the event of death for burial or cremation of the Insured Person in the locality where death occurs or the reasonable cost of transport of body or ashes to Hong Kong for each Insured Person.

EXCLUDING

In addition to the Policy exclusions in Section 1, the following also applies:-

- Emergency Medical Evacuation or Repatriation/Repatriation of Mortal Remains or costs not approved and arranged by the Assistance Company or its authorized representative, except when We reserve the right to waive this exclusion at Our full discretion and decision.
- The cost of burial in Hong Kong.

Section 3 – Personal Accident

We will pay the following benefit per Insured Person in the event of accidental bodily Injury being sustained by an Insured Person during the Journey.

COMPENSATION TABLE

	VIP	Classic
Maximum Benefit per Insured Person	\$1,000,000	\$500,000

AXA Assistance (IPA) Worldwide Alarm Centre 安盛全球緊急援助中心

Hong Kong	香港	852 2861 9285
Singapore	新加坡	800 8523 636
Australia	澳洲	1800 467 856
U.S.A.	美國	1 866 654 4270
United Kingdom	英國	0800 051 7229



Benefit	Compensation (% of the Maximum Benefit per Insured Person)
(1) Accidental Death	100%
(2) Permanent Total Disablement	100%
(3) Permanent and incurable paralysis of all Limbs	100%
(4) Permanent total Loss of Sight of both Eyes	100%
(5) Permanent total Loss of Sight of one Eye	100%
(6) Loss of or the Permanent total Loss of Use of two Limbs	100%
(7) Loss of or the Permanent total Loss of Use of one Limb	100%
(8) Permanent Loss of Speech and Loss of Hearing	100%
(9) Permanent total Loss of Hearing in	
(a) both ears	75%
(b) one ear	20%
(10) Permanent Loss of Speech	50%

EXTENSIONS

It is extended to cover

- (a) Third Degree Burn

If as a result of an Accident the Insured Person sustains an Injury and is diagnosed by a Qualified and Licensed/Registered Medical Practitioner to have suffered any of the Events listed hereunder, We will pay the Insured Person in respect of the following Events as specified below.

EVENTS	COMPENSATION	
Third Degree Burn	VIP	Classic
On 45% or more of body surface	\$200,000	\$100,000
On 27% or more of body surface	\$120,000	\$60,000
On 18% or more of body surface	\$100,000	\$50,000
On 9% or more of body surface	\$60,000	\$30,000
On 4.5% or more of body surface	\$40,000	\$20,000

Compensation shall not be payable for more than one of the above Events in respect of the same accidental bodily Injury. Should more than one of the Events occur from the same accidental bodily Injury, We shall only be liable for the greatest Compensation.

DEFINITIONS

- a. "Burns" means tissue damage caused by the agent of heat only.
b. "Degree" means the unit of measurement for the Burns customarily used by the local government in the place where this Policy is issued.
c. "Third Degree Burn" means the damage or destruction of the skin to its full depth and damage to the tissues beneath.

- (b) Compassionate Death Cash Benefit

We will pay the Insured Person's beneficiary in the event of the death of the Insured Person either due to Accident or sickness only.

Sub-limit per Insured Person	VIP	Classic
(a) Death due to accidental bodily Injury	\$50,000	\$25,000
(b) Death due to sickness	\$20,000	\$10,000

- (c) Credit Card Protection

We will pay for any outstanding balance payable on the credit cards of the deceased Insured Person for items and sundries charged to his/her credit cards as at the date of Accident if during the Journey the Insured Person sustains Injury which directly causes or results in his/her death; provided the accidental death benefit is paid or payable under the same Injury.

Sub-limit per Insured Person	VIP	Classic
	\$50,000	\$30,000

- (d) Disappearance

Accidental death shall not in any way be presumed by reason of the disappearance of the Insured Person except in the event of the total loss by sinking or wrecking of the ship or aircraft in which the Insured Person was travelling at the material time. Accidental death payment is subject to the receipt of a signed undertaking by the personal representative(s) of the Insured Person's estate and that such payment shall be refunded to Us if it is later discovered that the Insured Person is found to be living and had not suffer Accident death as a result of the Accident.

PROVISIONS

- (i) In respect of an Insured Person who is aged under 18, the Sum Insured of benefit (1) will be limited to \$100,000 irrespective of the plan selected.
(ii) In respect of an Insured Person who is aged over 70, the maximum amount We will pay under this Section will be limited to 50% of the above benefits (1) to (10).
(iii) No claims will be payable :
(a) Under benefits (1) and (2) unless such benefits occurs within 12 months from the date of Accident;
(b) Under benefits (3) to (10), except on proof to Us that the disablement has continued for 12 months from the date of Injury and in all probability, will continue for the remainder of the Insured Person's life.
(iv) The amount of all benefits (1) to (10) and extension (a) payable for one or more Injuries sustained by an Insured Person during the Journey shall not exceed \$1,000,000 and \$500,000 for VIP and Classic Plan respectively.
(v) No interest accrued or financial charges shall be covered under extension (c).
(vi) We will not pay for extension (c) if the Insured Person is entitled to this benefit under any other source.
(vii) Extension (c) is not applicable to Insured Persons aged under 18 years of age.
(viii) This section exclude cover for illness, sickness, disease, any pre-existing physical or mental defect or infirmity, bacterial or viral infections even if contracted by Accident. This does not exclude bacterial infection that is the direct result of an accidental cut or wound.
(ix) When a Limb which had been partially dysfunctional or disabled prior to an Injury covered under this Policy and which becomes totally dysfunctional or disabled as a result of such Injury, the percentage of sum insured payable shall be determined by Us in its sole discretion having regard to the extent of disablement caused by the Injury. No payment however shall be made in respect of the loss of or the Permanent total Loss of Use of one Limb which was totally dysfunctional or disabled prior to the Injury.

Section 4 – Baggage and Personal Effects

	VIP	Classic
Maximum Limit per Insured Person	\$25,000	\$15,000
Limit per article/pair/set of article	\$7,500	\$5,000
Limit per mobile phone or tablet computer	\$3,000	\$2,000
(Subject to a maximum of one set of either item)		

We will pay the incurred loss of or damage to baggage taken, sent in advance or purchased

on the Journey (including clothing and personal effects worn or carried on the Insured Person, trunks, suitcases, receptacles and the like), occurring during the Journey and owned by the Insured or Insured Person.

In the event that the Insured or the Insured Person purchases a replacement item comparable with the original brand, style & condition of the lost article, We will only pay for the replacement cost provided the lost article was not more than 2 years old at the date of loss. If the Insured or the Insured Person cannot prove the age of the lost article or if the article is more than 2 years old or if the article is not replaced, We will assess the claim on the basis of intrinsic value of the article, or the cost of repair, whichever is the lesser.

If any article is proven to be beyond economic repair, a claim will be assessed under this Policy as if the article had been lost.

We have the option to indemnify the Insured or the Insured Person by cash payment for the loss or damage or by repair or replacement.

In the event of loss or damage occurring whilst the Insured property is in the custody or control of the Public Common Carrier, the Insured Person should firstly lodge his/her claim against that Public Common Carrier.

We shall reimburse the balance if the Insured or the Insured Person is not fully compensated by the Public Common Carrier subject to the limit under this Section of the Policy.

PAIR AND SET CLAUSE

Where any insured item consists of articles in a pair or set, this Section will not pay more than the value of any particular part or parts which may be lost, without reference to any special cause which such article or articles may have as part of such pair or set, nor more than a proportionate part of the insured value of the pair or set.

EXCLUDING

- Loss of or damage arising from delay or confiscation or detention by Customs or other official.
- Loss of or damage to stamps, documents, contact or conceal lenses or damage to fragile or brittle articles such as glass or crystal.
- Loss of or damage to Business goods or samples.
- Loss or damage caused by normal wear and tear, gradual deterioration or mechanical or electrical breakdown or derangement.
- Loss or damage whilst in the custody of the Public Common Carrier, unless reported immediately on discovery and, in the case of an airline, a Property Irregularity Report obtained.
- Loss not reported to the police within 24 hours and a report obtained, unless:-
(i) to do so would be impossible;
(ii) by doing so would invoke an additional claim under another Section of the Policy.
- Loss of or damage to banknotes, treasury bills, currency notes or any other form of negotiable document.
- Replacement cost of credit cards.
- Loss of unattended properties.
- Loss of data recovery or data recorded on tapes, cards, diskettes or laptop computer.
- Any loss claimed under Section 5 – Baggage Delay arising from the same cause.
- Any damage to sports equipment whilst in use.

Section 5 – Baggage Delay

Maximum Limit per Insured Person	VIP	Classic
	\$1,000	\$800

We will pay the incurred costs of emergency purchases of essential items or clothing or requisites consequent upon temporary deprivation of baggage for at least 6 hours from time of arrival at destination abroad due to mishandling by the airlines or carrier or hi-jack.

PROVISIONS

- (i) All claims must be substantiated by written confirmation from the Public Common Carrier or in the case of an airline, a Property Irregularity Report obtained on the number of hours and the reason of such delay.

EXCLUDING

- Any loss claimed under Section 4 – Baggage and Personal Effects arising from the same cause.
- Any baggage not being on the same Public Common Carrier of the Insured Person or souvenirs and articles mailed or shipped separately.

Section 6 – Personal Money and Travel Documents

Maximum Limit per Insured Person	VIP	Classic
	\$6,000	\$4,000

- (a) Personal Money

We will pay the incurred loss of money owned by the Insured or Insured Person (including cash, bank or currency notes, cheques, travellers cheques, postal or money orders), or loss of and unauthorized use of credit cards owned by the Insured Person by any person not related to, or residing with, the Insured Person.

Sub-limit per Insured Person	VIP	Classic
	\$3,000	\$2,000

- (b) Travel Documents

We will pay the actual replacement cost of travel documents including passports, Hong Kong Identity Card or the like, applicable entry visas, credit cards, driving licences, travel ticket and other travel documents belonging to the Insured Person following the accidental loss during the insured Journey. In the event of the loss of travel ticket and/or other travel documents belonging to the Insured Person during the Journey, We will also reimburse the additional travelling expenses and/or accommodation expenses incurred by the Insured Person, provided that the travelling class and/or the room type for the accommodation shall not be better than the original travelling class and/or the room type for the accommodation in the Journey.

Sub-limit per Insured Person	VIP	Classic
	\$3,000	\$2,000

EXCLUDING

- Loss not reported to the local police within 24 hours or for which a relevant police report is not obtained.
- Shortages due to error, omission, exchange or depreciation in value.
- Loss or damage arising from delay or confiscation or detention by Customs or other official.
- Loss of traveller's cheques not immediately reported to the local branch or agent of issuing authority.
- Any unexplained loss or mysterious disappearance.
- Loss of credit cards not immediately reported to the local branch or agent of issuing authority.
- Loss of credit cards not complying with the terms and conditions of the issuing authority.
- Loss of membership cards of any kind.
- Loss of any travel document and/or visas and/or travel ticket which is not necessary to complete the Journey.
- Any fine or penalties incurred due to non-replacement or late replacement of the documents by the Insured Person.

- 11 For the claim of both temporary and permanent version of the same travel document. In the event of such loss, the Insured Person may claim either 1 version.

Section 7 – Personal Liability

	VIP	Classic
Maximum Limit per Insured Person (inclusive of all costs and expenses)	\$3,000,000	\$1,500,000

To indemnify the Insured Person in respect of his/her legal liability towards third parties up to the limit of the plan selected arising during the Journey as a result of:-

- (1) Accidental bodily Injury (including death).
- (2) Accidental loss of or damage to property.

In addition, to indemnify the Insured Person for:-

- (3) third parties costs and expenses recoverable from the Insured Person either under Common Law or under the law of the country where the Accident, loss or damage occurred; and
- (4) the Insured Person's costs and expenses incurred with Our prior written consent.

EXCLUDING

Claims arising directly or indirectly from, in respect of or due to:-

- 1 Employers' Liability, contractual liability or liability to a member of an Insured Person's Family, Travel Companion.
- 2 Property belonging to or held in trust or in the care, custody or control of an Insured Person.
- 3 Any wilful, malicious or unlawful act.
- 4 Pursuit of trade, business or profession.
- 5 Ownership or occupation of land or building (other than occupation only of any temporary residence).
- 6 Ownership, possession or use of vehicles, aircraft or watercraft (other than small non-mechanical sailing craft, canoes, dinghies and the like).
- 7 Legal costs, fines, penalties or the like resulting from any criminal proceedings.
- 8 The Insured Person being under the influence of drugs or intoxicating liquor.

Section 8 – Travel Delay, Trip Re-routing, Missed Journey and Overbooking

	VIP	Classic
Maximum Limit per Insured Person	\$10,000	\$5,000

In respect of (a), (b) and (c) below as a direct result of: strike or other industrial action, riot, civil commotion, hijack, terrorism, adverse weather conditions, natural disaster, mechanical and/or electrical breakdown of the Public Common Carrier or closure of the airport, We will pay:

(a) Travel Delay

in the event of the Public Common Carrier in which the Insured Person has arranged to travel is delayed for at least 6 hours from the departure or arrival time specified in the Insured Person's original itinerary.

The period of delay will be calculated from EITHER:

- Departure delay - the original scheduled departure time of the Public Common Carrier specified in the itinerary supplied to the Insured Person until the actual departure time of (i) the original Public Common Carrier or (ii) the first available alternative transportation offered by that Public Common Carrier; or
- Arrival delay - the original arrival time of the Public Common Carrier specified in the itinerary supplied to the Insured Person until the actual arrival time of (i) the original Public Common Carrier or (ii) the first available alternative transportation offered by that Public Common Carrier.

The Insured Person can only claim for either Departure delay or Arrival delay of the same Public Common Carrier. If the Insured Person has consecutive connected flights, each period of delayed hours cannot be accumulated and the proximate cause of the delay must be due to the above-mentioned reasons.

	VIP	Classic
Sub-limit per Insured Person	\$2,500	\$2,000
Each and every full 6 hours	\$300	\$250

(b) Extra Accommodation Expenses, Irrecoverable Pre-paid Deposits or Charges due to Travel Delay

- (i) the additional, reasonable and irrecoverable accommodation expenses; or
- (ii) the irrecoverable pre-paid deposits or charges or contracted to be paid for the benefit of the Insured Person

incurred outside Hong Kong in the event that the outward or transit of the Public Common Carrier in which the Insured Person has arranged to travel is delayed for more than 6 hours from the time specified in the Insured Person's original itinerary or cancellation of the holiday/Journey by the Insured Person.

The Insured Person can only claim for either (i) or (ii) above.

	VIP	Classic
Sub-limit per Insured Person	\$3,000	\$2,000

(c) Trip Re-routing Costs due to Travel Delay

the additional and irrecoverable costs of travel ticket (economy class only) incurred by the Insured Person to reach the planned destination as specified in his/her original itinerary by an alternative means of Public Common Carrier in the event that the Public Common Carrier in which the Insured Person has scheduled to travel is cancelled as a consequence of the Public Common Carrier being delayed for more than 6 hours after the Insured Person's check-in. This benefit can only be utilized once during any one Journey.

	VIP	Classic
Sub-limit per Insured Person	\$10,000	\$5,000

(d) Missed Journey

We will pay expenses reasonably incurred for the accommodation and meals, if it is not provided or compensated by the Public Common Carrier or any third party, in the event that the Insured Person fails to board the Public Common Carrier due to missed transportation connection on which the Insured Person had obtained a confirmed reservation.

The failure to board the Public Common Carrier due to the missed Journey connection must be verified in writing by the Public Common Carrier.

	VIP	Classic
Sub-limit per Insured Person	\$10,000	\$5,000

(e) Overbooking

We will pay expenses reasonably incurred for the accommodation and meals, if it is not provided or compensated by the Public Common Carrier or any third party, in the event that the Insured Person fails to board the Public Common Carrier due to overbooking on which the Insured Person had obtained a confirmed reservation.

The failure to board the Public Common Carrier due to the overbooking must be verified in writing by the Public Common Carrier.

	VIP	Classic
Sub-limit per Insured Person	\$10,000	\$5,000

EXCLUDING

Claims arising from:

- 1 Failure of the Insured Person to check in according to the itinerary supplied to him/her, and failure to obtain written confirmation from the Public Common Carriers (or their handling agents) of the number of hours of delay and the reason for such delay.
- 2 Any circumstances leading to the relevant delay of the Journey which is existing or announced on or before the application date of this Policy (for Single Journey) or either before (i) the application date of this Policy or (ii) the date of booking the scheduled Journey.
- 3 Late arrival of the Insured Person at the airport, port, train station or other place of boarding after check-in or booking-in-time (except for the late arrival caused by events beyond control of the Insured Person).
- 4 Any loss in relation to alternations to schedules that is not verified by the Public Common Carrier, travel agency or other relevant organizations.
- 5 Any circumstances covered by other insurance scheme, government programme or which will be paid or refunded by travel agency, tour operator or other provider of any service forming part of the booked itinerary (except for (a) Travel Delay).
- 6 In respect of losses claimed under Section 10 – Trip Curtailment arising from the same cause.

Section 9 – Loss of Deposit or Cancellation of Trip

	VIP	Classic
Maximum Limit per Insured Person	\$50,000	\$25,000

We will pay for the loss of irrecoverable deposits or charges paid in advance or contracted to be paid for the benefit of the Insured Person, in the event that the following is occurring after this insurance has been effected:

- (i) unexpected outbreak of strike, riot, civil commotion, terrorism, hijack, natural disasters or adverse weather conditions at the planned destination arising within 7 days before the departure date of the Journey.
- (ii) serious damage to the Insured Person's principal home in Hong Kong arising from fire, flood or burglary within 7 days before the departure date of the planned Journey which requires the Insured Person's presence in Hong Kong on the departure date of the Journey for the purpose of police investigation.
- (iii) the Government of the Hong Kong Special Administrative Region issuing a "Red" or "Black" alert for the planned destination, according to the "Outbound Travel Alert System", within 7 days before the departure date of the Journey (notwithstanding General Exclusions 1A(iii)). For "Red" alert, We will reimburse up to 50% of the irrecoverable deposits or charges paid in advance.
- (iv) death, serious physical injury or serious illness of the Insured Person, Immediate Family Member, Close Business Partner or Travel Companion.
- (v) witness summons, jury service or Compulsory Quarantine of the Insured Person.
- (vi) bankruptcy of a travel agent licensed by the Registrar of Travel Agents and who is a member of the Travel Industry Council of Hong Kong to whom the Insured and/or the Insured Person have made travel deposits or travel fares to.

EXCLUDING

Refer to EXCLUDING (Applicable to Section 9 and 10) stated under Section 10 - Trip Curtailment.

Section 10 – Trip Curtailment

	VIP	Classic
Maximum Limit per Insured Person	\$50,000	\$25,000

We will pay for the proportional return of relevant irrecoverable prepaid cost of the booked itinerary as shown on the booking invoice, calculated at pro-rata for each complete day of the booked itinerary lost, or additional incurred travel costs (confined to economy class) and accommodation expenses reasonably and necessarily incurred, in the event that the Insured Person has to abandon the Journey and return to Hong Kong after the Journey has begun due to:

- (i) unexpected outbreak of strike, riot, civil commotion, terrorism, hijack, natural disasters or adverse weather conditions at the planned destination which prevents the Insured Person from continuing with his/her scheduled Journey.
- (ii) serious damage to the Insured Person's principal home in Hong Kong arising from fire, flood or burglary.
- (iii) the government of the Hong Kong Special Administrative Region issuing a "Red" or "Black" alert for the planned destination, according to the "Outbound Travel Alert System", during the Journey (notwithstanding General Exclusions 1A(iii)). For "Red" alert, We will reimburse up to 50% of the relevant irrecoverable prepaid cost or additional costs and expenses as stipulated in this section.
- (iv) death, serious physical injury or serious illness of the Insured Person, Immediate Family Member, Close Business Partner or Travel Companion.
- (v) bankruptcy of a travel agent licensed by the Registrar of Travel Agents and who is a member of the Travel Industry Council of Hong Kong to whom the Insured and/or the Insured Person have made travel deposits or travel fares to.

Curtailment expenses payable in relation to the amount of prepaid cost of the booked itinerary and/or travel costs and/or accommodation expenses forfeited will be calculated in proportion to the number of days remaining after the relevant interruption of the Journey.

The Insured Person can only claim for either the forfeited expenses for the Journey or additional expenses incurred for the curtailment.

EXCLUDING (Applicable to Section 9 and 10)

Claims arising directly or indirectly from, in respect of or due to:

- 1 Any government's regulations control or act, bankruptcy, liquidation, error, omission or default of any travel agency, tour operator, Public Common Carrier and/or other provider of any service forming part of the booked itinerary, except bankruptcy of the licensed travel agent as specified above.
- 2 Disinclination to travel or financial circumstances of the Insured or any Insured Person.
- 3 Any unlawful act or criminal proceedings of any Insured Person on whom the Journey depend, other than attendance under subpoena as a witness at a Court of Law.
- 4 Failure to notify the travel agency, tour operator, Public Common Carrier and/or other provider of any service forming part of the booked itinerary of the need to cancel or curtail the travel arrangement immediately when it is found necessary to do so.
- 5 Any circumstances leading to the cancellation or curtailment of the Journey which is existing or announced on or before the application date of this Policy (for Single Journey) or either before (i) the application date of this Policy or (ii) the date of booking the scheduled Journey.
- 6 Any medical condition or other circumstances known to have existed on or before the application date of this Policy (for Single Journey) or either before (i) the application date of this Policy or (ii) the date of booking the scheduled Journey.
- 7 Any loss which will be paid or refunded by any existing insurance scheme, government programme, Public Common Carrier, travel agency or any other provider of transportation and/or accommodation.
- 8 Any loss in relation to cancellations or curtailments to schedules that is not verified by the Public Common Carrier, travel agency or other relevant organizations.
- 9 Failure to obtain a written medical report from the Qualified and Licensed/Registered Medical Practitioner.
- 10 Any expenses incurred for services provided by another party for which the Insured Person is not liable to pay and/or any expenses already included in the cost of a scheduled Journey.

- 11 Any loss if the Insured Person refuses to follow the recommendation of the Qualified and Licensed/Registered Medical Practitioner and to return to Hong Kong on Insured Person's own decision, or refuses to continue the Journey whilst the Insured Person's physical condition at the time of recommendation is fit for travel (Applicable to Section 10 – Trip Curtailment only).
- 12 In respect of losses claimed under Section 8 – Travel Delay, Trip Re-routing, Missed Journey and Overbooking arising from the same cause (Applicable to Section 10 – Trip Curtailment only).
- 13 Any training or studying courses fee and/or deposits.

Section 11 – Home Care Benefit

	VIP	Classic
Maximum Limit per Insured Person	\$20,000	\$10,000

We will, in the event of any accidental fire and/or burglary, provide indemnity to Insured Person by cash payment, repair or reinstatement, at Our option, against physical loss of or damage to the Contents within Insured Person principal residence in Hong Kong which was left vacant when Insured Person is on a Journey.

"Contents" means household furniture and furnishing, clothing and personal effects belonging to Insured Person or to Insured Person's Family members or domestic helpers permanently residing with Insured Person and fixtures and fittings Insured Person owns (for which Insured Person is responsible) not being landlord's fixtures and fittings. Contents shall exclude deeds, bonds, bills of exchange, promissory notes, cheques, travellers' cheques, securities for money, documents of any kind, cash, currency notes, articles of gold, silver or other precious metal, jewellery, furs, watches, and precious or semi-precious gems.

In the event of loss of or damage to any property insured forming part of a pair or set, Our liability shall not exceed a proportionate part of the value on the pair or set. We shall not be liable for more than \$2,000 in respect of any one article or pair or set of articles.

EXCLUDING

We will not pay for claims arising directly or indirectly from, in respect of, or due to:

- 1 Wear, tear, depreciation, the process of cleaning, dyeing repairing or restoring any article, the action of light or atmospheric conditions, moth, insects, vermin or any other gradually operating cause.
- 2 Any loss or damage occasioned through the willful act of the Insured Person or with the connivance of the Insured Person.
- 3 Any loss (whether temporary or permanent) of the Insured property or any part thereof by reason of confiscation, requisition, detention or legal or illegal occupation of such property or of any premises, vehicle or thing containing the same by any government authorities.
- 4 Electrical or mechanical breakdown.
- 5 Business or professional use in respect of photographic and sporting equipment and accessories and musical instruments.
- 6 Motor vehicles, boats, bicycles and any equipment or accessories relating thereto.

Section 12 – Trauma Counseling

	VIP	Classic
Maximum Limit per Insured Person	\$25,000	\$15,000
Limit per visit per day	\$1,500	\$1,000

We will pay the cost of trauma counseling as recommended by the Qualified and Licensed/Registered Medical Practitioner in the event that the Insured Person witness &/or is the victim of a traumatic event include rape, armed hold up, assault, natural disaster or acts of terrorism only during the Journey.

Section 13 – Rental Vehicle Excess

	VIP	Classic
Maximum Limit per Insured Person	\$5,000	\$3,000

We will pay the motor insurance policy excess or deductibles incurred by the Insured Person in the event that the Insured Person is involved in a collision whilst the rental vehicle is driven by the Insured Person or the rental vehicle is stolen or parking damaged during the Journey. Provided that

- such vehicle is rented from a licensed rental vehicle company; and
- a rental agreement between the Insured Person and the licensed rental vehicle company is signed; and
- a relevant comprehensive motor insurance policy covering the rental vehicle, which is effected during the rental period.

EXCLUDING

- 1 Any condition under the influence of alcohol or drugs of the Insured Person who is controlling of a rental vehicle during the rental period.
- 2 Loss arising from operation of the rental vehicle which is in violation of the terms of the rental agreement or applicable comprehensive motor insurance.
- 3 Any illegal or unlawful use of the rental vehicle by the Insured Person during the rental period.
- 4 The Insured Person is not holding a valid driving license for the country.
- 5 Liability other than loss of or damage to the rental vehicle.
- 6 The rental of the following types of vehicles : motorcycles, mopeds, motorbikes, trailers or caravans, motor homes, trucks, commercial vehicles, recreational vehicles, off-road vehicles, vans and vehicles with more than 9 seats.

Section 14 – China Hospital Deposit Guarantee Benefit

(Only applicable if mentioned in the Certificate of Insurance or Policy Schedule)

In the event of accidental bodily Injury sustained or sickness contracted by the Insured Person during the Journey and the Insured Person is admitted into a Hospital under Hospital Network in China, the Assistance Company will, on Our behalf, guarantee to the Hospital under Hospital Network the amount of admission deposit upon presenting the China Hospital Deposit Guarantee Card (hereinafter called "China Card") by the Insured Person to the Hospital.

PROVISIONS

- (i) This benefit applies only within China and outside the Country of Residence of the Insured Person.
- (ii) The Insured Person is required to present the China Card and his/her identity card or any relevant travelling documents with his/her name and photo to the staff of Accident & Emergency Department under Hospital Network. The Assistance Company will on behalf of the Insured Person issue the deposit guarantee for hospital admission to the Hospital under Hospital Network.
- (iii) The Insured Person or his/her representative shall fully and directly settle the medical expenses including the deposit guarantee for hospital admission by the Assistance Company when the Insured Person is discharged.
- (iv) For checking the nearest Hospital under Hospital Network, the Insured Person may call 24-hour Emergency Assistance Hotline at (852) 2861 9285. The Insured Person is required to provide the information including but not limited to the name of the Insured Person, Policy Number, the contact number of the Insured Person or his/her representative, the location of the Insured Person and the brief description of the Accident/sickness and the nature of help required for verification. Upon the confirmation of the coverage, the Assistance Company will refer a Hospital under Hospital Network to the Insured Person.

- (v) While the Assistance Company will exercise its best endeavor to refer the Insured Person to the medical facilities in China. It is understood that the physicians, Hospitals and any kind of professionals to whom the Insured Person will be referred to by the Assistance Company are independent contractors responsible for their own acts and are not employees, agents or servants of the Assistance Company. Any Hospitals or physicians referred by the Assistance Company and chosen by the Insured Person shall also be acting as the principal party in giving their medical services. We and the Assistance Company will not be liable for any default in their medical services provided.
- (vi) In the event of the loss or damage of the China Card, the Insured Person shall report to Us in writing as soon as possible. A replacement card will be issued upon receiving a replacement card fee of \$50 from the Insured Person or the Insured.

DEFINITIONS

- a. "China" means the People's Republic of China excluding Hong Kong Special Administrative Region and Macau Special Administrative Region.
- b. "Hospital Network" means the network of Hospitals in China which joins the Assistance Company's Hospital Network scheme and accepts the China Card issued by Us and will allow the Insured Person to be admitted into the Hospitals without paying the admission deposit. A list of Hospital Network can be referred to Our website at www.axa.com.hk.
- c. "Country of Residence" means the Hong Kong Special Administrative Region.

General Exclusions

- 1 This Policy does not cover claims:-
 - A Directly or indirectly occasioned by, happening through or in consequence of-
 - (i) any Injury, illness, disease, infirmity, physical defect or condition which existed prior to the Journey.
 - (ii) the Insured Person engaging in sports or games in a professional capacity.
 - (iii) war, invasion, acts of foreign enemies, hostilities or war-like operations (whether war be declared or not), civil war, mutiny, riot or civil commotion assuming the proportions of or amounts to popular rising (except as specified under individual Sections), military rising, insurrection, rebellion, revolution, military or usurped power, martial law, confiscation or nationalisation or requisition or destruction of or damage to property by or under the order of any government or public or local authority.
 - (iv) the Insured Person's direct participation in terrorist acts.
 - (v) Accidents whilst the Insured Person is engaging in racing (other than on foot), motor rallies and competitions or aviation (other than as a fare-paying passenger in a duly certified multi-engine passenger carrying aircraft flown in the course of licensed operations for the transportation of passengers by air by a properly-licensed crew).
 - (vi) wilfully self-inflicted Injury or illness, insanity, the effect or influence (temporary or otherwise) of alcohol, or the use of drugs (other than drugs taken in accordance with treatment prescribed and directed by a registered medical practitioner, but not for the treatment of drug addiction), self-exposure to needless peril (except in an attempt to save human life or property).
 - (vii) nuclear fission, nuclear fusion or radioactive contamination arising from non-terrorist event, whether direct or indirect.
 - B In respect of any property more specifically insured or any claim which, but for the existence of this Policy, would be recoverable under any other Policy of insurance.
 - C Incidents which may give rise to a claim not notified directly in writing to Us within 31 days of the expiry of the individual scheduled travel itinerary.
 - D If the Insured Person is travelling contrary to the advice of a medical practitioner or for the purpose of obtaining medical treatment or for migration.
 - E For venereal disease or sexually transmissible diseases including AIDS (Acquired Immune Deficiency Syndrome) and ARC (AIDS Related Complex).
 - F For pregnancy, miscarriage, childbirth and all complications thereof.
 - G If the Insured Person engaging in any kind of labor or manual work; engaging in offshore activities like commercial diving, oil rigging, mining or aerial photography; handling of explosives; performing as actor/actress; being a site worker, fisherman, cook or kitchen worker; tour guide or tour escort during the period of insurance.
 - H Arising from "Black" alert for the planned destination, according to the "Outbound Travel Alert System", in existence prior to
 - (i) the issuance of the Policy Schedule/Certificate of Insurance (applicable to Single Journey); or
 - (ii) the date of booking the scheduled Journey (applicable to Annual Cover).
 - I Any incidents/circumstances which is existing or announced or publicly known on or before the date of booking the scheduled Journey and/or before the effective date of the Policy.
- 2 Sanction Limitation and Exclusion Clause

No insurer shall be deemed to provide cover and no insurer shall be liable to pay any claim or provide any benefit hereunder to the extent that the provision of such cover, payment of such claim or provision of such benefit would expose that insurer to any sanction, prohibition or restriction under United Nations resolutions or the trade or economic sanctions, laws or regulations of the European Union, United Kingdom or United States of America.

General Conditions

- 1 Compliance with Conditions

The due observance and fulfillment of all the terms and conditions of this Policy by the Insured, Insured Person, or anyone acting on his/her behalf insofar as they relate to anything to be done or complied with by the Insured, Insured Person, or anyone acting on his/her behalf shall be a condition precedent to any liability of Us to make any payment under this Policy.
- 2 Reasonable Care

The Insured or Insured Person shall act in a prudent manner and exercise reasonable care and prevent Accidents, Injury, illness, loss or damage.
- 3 Fraud

If any claim shall be fraudulent or intentionally exaggerated or if any false declaration or statement shall be made, then this Policy shall be void and no claim shall be payable.
- 4 Claim

In the event of a claim, the Insured or Insured Person should:-

 - (a) advise Us in writing as soon as possible but always subject to 1C under General Exclusions.
 - (b) provide all documents, information and evidence as may be required by Us at the expense of the Insured, Insured Person or his/her legal representatives.
 - (c) in the case of loss of or damage to baggage whilst in the custody of carriers or loss of baggage or money, obtain a report from the carrier, the police or other proper authority and provide a copy when claiming to Us.
 - (d) in the event of travel delay, obtain written confirmation from the Public Common Carrier for the reason and duration of the delay.
 - (e) in the event of loss of money, loss must be reported to the police within 24 hours of discovery and a report obtained.
 - (f) not to admit liability or to give any representations or other undertakings binding upon the Insured or the Insured Person except with Our written consent.
 - (g) render his/her full co-operation during the course of investigation or assessment of the claim.

- 5 **Company's Rights after a Claim**
We shall be entitled to conduct, in the name of and on behalf of the Insured or Insured Person, the defence or settlement of any legal action and take proceedings at Our own expenses and for Our own benefit but in the name of the Insured or Insured Person to recover compensation from any third party in respect of anything covered by this Policy and to instruct solicitors of Our own choice for this purpose. In the event of the death of the Insured Person, We shall have the right to have a post mortem at Our own expense.
- 6 **Arbitration**
If any difference shall arise as to be the amount to be paid under this Policy (liability being otherwise admitted), such difference shall be referred to an arbitrator to be appointed by the parties in accordance with the statutory provisions for the time being in force in Hong Kong. Where any difference is, by this condition, to be referred to arbitration, the making of an award shall be a condition precedent to any right of action against Us.
- 7 **Premium**
No refund of premium is allowed once the Policy Schedule/Certificate of Insurance has been issued (except for Annual Cover).
- 8 **Payment of Claims**
Indemnity for loss of life will be payable in accordance with the beneficiary designation and the provisions respecting such payment which may be prescribed herein and effective at the time of payment. If no such designation or provision is then effective, such indemnity shall be payable to the estate of the Insured or the Insured Person. Any other accrued indemnities unpaid at the Insured or the Insured Person's death may, at Our option, be paid either to such beneficiary or to such estate. All other indemnities will be payable to the Insured or the Insured Person.
Payment to the designated beneficiary or, if none or if such beneficiary cannot be found after reasonable enquiry, to the Insured or the Insured Person's executives or personal representatives shall discharge Our all further liability hereunder and We shall in no circumstances be liable to see to the application or distribution of any amount so paid pursuant to this Policy.
Payment of the claims will be based on the exchange rate prevailing at the date of loss.
- 9 This policy shall be governed and construed in accordance with the laws of Hong Kong and any dispute or difference that arises under this Policy shall be settled in accordance with the laws of Hong Kong.
- 10 **Applicable to Annual Cover Only**
- (a) **Cancellation**
We may cancel this Policy by sending 30 days notice by registered letter to the Insured at his/her last known address and, in such event, the Insured shall become entitled to the return of a proportionate part of the premium corresponding to the unexpired portion of the period of insurance.
The Insured may also cancel the Policy by sending 30 days written notice to Us. We shall then refund (provided no claim has arisen during the current period of insurance) the unexpired portion of premium of the period of insurance to the Insured subject to a minimum premium of 50% of the annual premium paid.
- (b) **Addition of Insured Person**
No person added to any group in the Policy Schedule shall be covered by this Policy unless such person is specifically named as an Insured Person and evidenced by a written endorsement to this Policy.
- (c) **Additional Premium**
Additional premium will be charged on a pro-rata basis for each additional Insured Person included under this Policy after the commencement of the period of insurance or at the time of renewal of this Policy (except for Family Plan).
- (d) **Renewal**
Before renewal of this Policy, the Insured must give notice to Us of any sickness or physical defect or infirmity of which the Insured has become aware of during the preceding period of insurance.
- 11 **Age Limit**
Insured Person must be aged between 30 days to the age of 85 years old.
For annual cover, the Insured Person must be at or below 75 years of age on the first commencement date of the Policy, and renewal is allowed up to the age of 80 years old. All benefits would be payable according to the age of the Insured Person on the commencement date of the period of insurance.
- 12 **Duplicate Cover**
If the Insured Person is insured with Us by more than one travel insurance (except all group travel insurance which is actually paid by any company, group or association to insure the Insured Person) covering under the same Journey, then We will only be liable to pay for the loss up to the limit of the highest coverage policy.
- 13 **Contracts (Rights of Third Parties) Ordinance**
Any person or entity who is not a party to this Policy shall have no rights under the Contracts (Rights of Third Parties) Ordinance (Cap 623 of the Laws of Hong Kong) to enforce any terms of this Policy.
- 14 The total amount payable under each section shall not exceed the maximum limit as stated in the Policy respectively.

Personal Information Collection Statement

AXA General Insurance Hong Kong Limited (referred to hereinafter as the "Company") recognises its responsibilities in relation to the collection, holding, processing, use and/or transfer of personal data under the Personal Data (Privacy) Ordinance (Cap. 486) ("PDPO"). Personal data will be collected only for lawful and relevant purposes and all practicable steps will be taken to ensure that personal data held by the Company is accurate. The Company will take all practicable steps to ensure security of the personal data and to avoid unauthorised or accidental access, erasure or other use. Please note that if you do not provide us with your personal data, we may not be able to provide the information, products or services you need or process your request.

Purpose: From time to time it is necessary for the Company to collect your personal data (including credit information and claims history) which may be used, stored, processed, transferred, disclosed or shared by us for purposes ("Purposes"), including:

- offering, providing and marketing to you the products/services of the Company, other companies of the AXA Group ("our affiliates") or our business partners (see "Use and provision of personal data in direct marketing" below), and administering, maintaining, managing and operating such products/services;
- processing and evaluating any applications or requests made by you for products/services offered by the Company and our affiliates;
- providing subsequent services to you, including but not limited to administering the policies issued;
- any purposes in connection with any claims made by or against or otherwise involving you in respect of any products/services provided by the Company and/or our affiliates, including investigation of claims;
- detecting and preventing fraud (whether or not relating to the products/services provided by the Company and/or our affiliates);
- evaluating your financial needs;
- designing products/services for customers;
- conducting market research for statistical or other purposes;
- matching any data held which relates to you from time to time for any of the purposes listed herein;
- making disclosure as required by any applicable law, rules, regulations, codes of practice or guidelines or to assist in law enforcement purposes, investigations by police or other government or regulatory authorities in Hong Kong or elsewhere;

- conducting identity and/or credit checks and/or debt collection;
- complying with the laws of any applicable jurisdiction;
- carrying out other services in connection with the operation of the Company's business; and
- other purposes directly relating to any of the above.

Transfer of personal data: Personal data will be kept confidential but, subject to the provisions of any applicable law, may be provided to:

- any of our affiliates, any person associated with the Company, any reinsurance company, claims investigation company, your broker, industry association or federation, fund management company or financial institution in Hong Kong or elsewhere and in this regard you consent to the transfer of your data outside of Hong Kong;
- any person (including private investigators) in connection with any claims made by or against or otherwise involving you in respect of any products/services provided by the Company and/or our affiliates;
- any agent, contractor or third party who provides administrative, technology or other services (including direct marketing services) to the Company and/or our affiliates in Hong Kong or elsewhere and who has a duty of confidentiality to the same;
- credit reference agencies or, in the event of default, debt collection agencies;
- any actual or proposed assignee, transferee, participant or sub-participant of our rights or business;
- any government department or other appropriate governmental or regulatory authority in Hong Kong or elsewhere; and
- the following persons who may collect and use the data only as reasonably necessary to carry out any of the purposes described in paragraphs nos. 2, 3, 4 and 5 of the Purposes specified above: insurance adjusters, agents and brokers, employers, health care professionals, hospitals, accountants, financial advisors, solicitors, organisations that consolidate claims and underwriting information for the insurance industry, fraud prevention organisations, other insurance companies (whether directly or through fraud prevention organisation or other persons named in this paragraph), the police and databases or registers (and their operators) used by the insurance industry to analyse and check data provided against existing data.

For our policy on using your personal data for marketing purposes, please see the section below "Use and provision of personal data in direct marketing".

Transfer of your personal data will only be made for one or more of the Purposes specified above.

Use and provision of personal data in direct marketing: The Company intends to:

- use your name, contact details, products and services portfolio information, transaction pattern and behaviour, financial background and demographic data held by the Company from time to time for direct marketing;
- conduct direct marketing (including but not limited to providing reward, loyalty or privileges programmes) in relation to the following classes of products and services that the Company, our affiliates, our co-branding partners and our business partners may offer:
 - insurance, banking, provident fund or scheme, financial services, securities and related products and services;
 - products and services on health, wellness and medical, food and beverage, sporting activities and membership, entertainment, spa and similar relaxation activities, travel and transportation, household, apparel, education, social networking, media and high-end consumer products;
- the above products and services may be provided by the Company and/or:
 - any of our affiliates;
 - third party financial institutions;
 - the business partners or co-branding partners of the Company and/or affiliates providing the products and services set out in (2) above;
 - third party reward, loyalty or privileges programme providers supporting the Company or any of the above listed entities
- in addition to marketing the above products and services, the Company also intends to provide the data described in (1) above to all or any of the persons described in (3) above for use by them in marketing those products and services, and the Company requires your written consent (which includes an indication of no objection) for that purpose;

Before using your personal data for the purposes and providing to the transferees set out above, the Company must obtain your written consent, and only after having obtained such written consent, may use and provide your personal data for any promotional or marketing purpose.

You may in future withdraw your consent to the use and provision of your personal data for direct marketing.

If you wish to withdraw your consent, please inform us in writing to the address in the section on "Access and correction of personal data". The Company shall, without charge to you, ensure that you are not included in future direct marketing activities.

Access and correction of personal data: Under the PDPO, you have the right to ascertain whether the Company holds your personal data, to obtain a copy of the data, and to correct any data that is inaccurate. You may also request the Company to inform you of the type of personal data held by it.

Requests for access and correction or for information regarding policies and practices and kinds of data held by the Company should be addressed in writing to:

Data Privacy Officer
AXA General Insurance Hong Kong Limited
5/F AXA Southside, 38 Wong Chuk Hang Road,
Wong Chuk Hang, Hong Kong

A reasonable fee may be charged to offset the Company's administrative and actual costs incurred in complying with your data access requests.

Caring for Our Customers

We at AXA General Insurance Hong Kong Limited make every effort to provide a good standard of service to all Our Policyholders. If on any occasion Our service falls below the standard you would expect Us to meet, the procedure below explains what you should do

- Your first point of contact should always be your insurance agent or broker. Alternatively, you may submit your feedback to the AXA Manager in charge of the matter you are raising.
- If, following contact with the above, you feel that you require further assistance then please write to

Chief Executive Officer
AXA General Insurance Hong Kong Limited
5/F AXA Southside, 38 Wong Chuk Hang Road,
Wong Chuk Hang, Hong Kong

An acknowledgement that your complaint has been received will be sent to you within two working days following which your complaint will be investigated. If We have your telephone number We will call you.

- AXA General Insurance Hong Kong Limited is a member of the Insurance Complaints Bureau. If your complaint concerns a claim and after following the above procedure your claim has not been resolved to your satisfaction, you may write to the Insurance Complaints Bureau at the following address

Insurance Complaints Bureau
29/F, Sunshine Plaza
353 Lockhart Road
Wanchai, Hong Kong

If the Insurance Complaints Bureau decides that Our handling of your claim has been unreasonable or technically incorrect, their decision is binding on Us by the terms of an agreement We have signed.

Important - Please remember to quote your Policy reference in any communication.

Note: All amounts are in Hong Kong Dollars.

ENDORSEMENT – Enhanced Personal Accident benefit (only applicable if mentioned in the Certificate of Insurance or Policy Schedule)

It is hereby noted and agreed that in consideration of the additional premium paid, the Compensation Table and Provisions under Section 3 – Personal Accident; are deemed to be deleted and replaced by the followings.

COMPENSATION TABLE

	VIP	Classic
Maximum Benefit per Insured Person	\$1,000,000	\$500,000
Benefit	Compensation (% of the Maximum Benefit per Insured Person)	
(1) Accidental Death	100%	
(2) Permanent Total Disablement	100%	
(3) Permanent and incurable paralysis of all Limbs	100%	
(4) Permanent total Loss of Sight of both Eyes	100%	
(5) Permanent total Loss of Sight of one Eye	100%	
(6) Loss of or the Permanent total Loss of Use of two Limbs	100%	
(7) Loss of or the Permanent total Loss of Use of one Limb	100%	
(8) Permanent Loss of Speech and Loss of Hearing	100%	
(9) Permanent and incurable insanity	100%	
(10) Permanent total Loss of Hearing in		
(a) both ears	75%	
(b) one ear	20%	
(11) Permanent Loss of Speech	50%	
(12) Permanent total loss of the lens of one eye	50%	
(13) Loss of or the Permanent total Loss of Use of four Fingers and thumb of		
(a) right hand	70%	
(b) left hand	50%	
(14) Loss of or the Permanent total Loss of Use of four Fingers of		
(a) right hand	40%	
(b) left hand	30%	
(15) Loss of or the Permanent total Loss of Use of one thumb		
(a) both right joints	30%	
(b) one right joint	15%	
(c) both left joints	20%	
(d) one left joint	10%	
(16) Loss of or the Permanent total Loss of Use of Fingers		
(a) three right joints	15%	
(b) two right joints	10%	
(c) one right joint	7.5%	
(d) three left joints	10%	
(e) two left joints	7.5%	
(f) one left joint	5%	
(17) Loss of or the Permanent total Loss of Use of Toes		
(a) all - one foot	20%	
(b) great - both joints	7.5%	
(c) great - one joint	5%	
(d) any other toe	3%	
(18) Fractured Leg or Patella with Established Non-Union	15%	
(19) Shortening of leg by at least 5cm	10%	
(20) Permanent disablement not falling under Disability (2) to (19) inclusive, We may, at Our absolute discretion, pay the Insured Person a sum of compensation which shall be calculated by Us and by reference to the degree of such a Disability and being in its opinion not inconsistent with the Disability (2) to (19) inclusive.		

DEFINITIONS

“**Disability/Disabilities**” means any of the Disability(ies) (including accidental death) listed in the Compensation Table as above which must be resulted from an Injury of the Insured Person.

“**Loss of Fingers or Toes**” means complete severance through or above the metacarpophalangeal joints or metacarpophalangeal joints.

PROVISIONS

- (i) In respect of an Insured Person who is aged under 18, the Sum Insured of benefit (1) will be limited to \$100,000 irrespective of the plan selected.
- (ii) In respect of an Insured Person who is aged over 70, the maximum amount We will pay under this Section will be limited to 50% of the above benefits (1) to (20).
- (iii) No claims will be payable:
 - (a) Under benefits (1) and (2) unless such benefits occurs within 12 months from the date of Accident;
 - (b) Under benefits (3) to (20), except on proof to Us that the disablement has continued for 12 months from the date of Injury and in all probability, will continue for the remainder of the Insured Person’s Life.
- (iv) Compensation payable in respect of “right hand” and “left hand” under benefit (13) to (16) inclusive of the Compensation Table shall be reversed in the Insured person is left-handed.
- (v) If the Insured Person suffered from a loss of or the Permanent total Loss of Use of Limb and a Toe(s) or a Finger(s) of the same Limb which gives rise to compensate being payable under the Compensation Table, the Insured Person will only be entitled to the compensation in respect of the loss of or the Permanent total Loss of Use of one Limb under the Compensation Table.
- (vi) Where the aggregate amount of compensation paid in respect of the Insured Person is equal or exceed to the maximum benefit per Insured Person, We shall be under no further liability under this Policy in respect of the same Insured Person for Injury sustained thereafter. Where the aggregate amount of compensation paid in respect of the Insured Person is less than the maximum benefit per Insured Person, the Disability as stated in the Compensation Table applicable to that Insured Person shall be reduced to the amount of original sum insured that remains unpaid.
- (vii) When a Limb or organ which had been partially dysfunctional or disabled prior to an Injury covered under this Policy and which becomes totally dysfunctional or disabled as a result of such Injury, the percentage of sum insured payable shall be determined by Us in its sole discretion having regard to the extent of disablement caused by the Injury. No payment however shall be made in respect of the loss of or the Permanent total Loss of Use of one Limb or organ which was totally dysfunctional or disabled prior to the Injury.
- (viii) The amount of all benefits (1) to (19) and extension (a) payable for one or more Injuries sustained by an Insured Person during the Journey shall not exceed \$1,000,000 and \$500,000 for VIP and Classic Plan respectively.
- (ix) No interest accrued or financial charges shall be covered under extension (c) – credit card protection.
- (x) We will not pay for extension (c) – credit card protection if the Insured Person is entitled to this benefit under any other source.
- (xi) Extension (c) - credit card protection is not applicable to Insured Persons aged under 18 years of age.
- (xii) This section exclude cover for illness, sickness, disease, any pre-existing physical or mental defect or infirmity, bacterial or viral infections even if contracted by Accident. This does not exclude bacterial infection that is the direct result of an accidental cut or wound.

Subject otherwise to the terms, conditions and exclusions of this policy.

Note: All amounts are in Hong Kong Dollars.

保單

「卓越」優遊樂

附錄於保險保單並構成其一部份的保單承保條款

歡迎選用安盛保險有限公司的「卓越」優遊樂保險計劃。

閣下的保單包含下列文件：

- 投保書(如有)
- 本保單內使用的保單用語
- 保單附表/保險證明書

閣下的保單附表/保險證明書顯示：

- 閣下投保的項目詳情
- 受保期
- 任何可能適用於閣下保單的特定承保條款

閣下繳交保單附表/保險證明書內所述的保費後，倘若閣下於受保期內發生意外、受傷或遭受損失，本公司會提供閣下從下列投保項目中已選擇的保障。

請閱讀本保單保障詳情及閣下的保單附表/保險證明書，以確保閣下知悉所獲提供的保障範圍。

定義

保單內某些詞語具有特定涵義。這些詞語在保單或保單附表/保險證明書內任何部份使用時，或於後來作為保單或保單附表/保險證明書簽註時均具相同涵義。有關詞語的涵義已列於下文，或於適當分節的開首處作出界定。

意外 - 是指一件突然發生而不可預見及偶然的事件。

子女(一名或多名) - 是指列明在保單附表/保險證明書上，於本保單生效當日年齡由30日至18歲以下受供養的未婚子女。

緊密商業夥伴 - 與受保人為同一商業目的同行的商業夥伴，而其同行對受保人的業務而言是必須的。

強制隔離 - 指受保人被安排入住在一所醫院的隔離病房或政府安排的隔離地點最少24小時，並連續地逗留該處直至隔離解除後始獲准離開。

家庭 - 指受保人、其配偶及其子女(人數不限)，並於整個旅程當中同行。

香港 - 指香港特別行政區

醫院 - 指一所符合下列所有條件的機構：

- 持有醫院牌照(如有關國家或政府規定須持有有關牌照)；
- 基本上接收生病、患病或受傷人士為住院病人並為他們提供護理及治療；
- 由註冊護士或護士畢業生每日24小時提供護理服務；
- 有一名或以上持有牌照的醫生隨時候命；
- 提供有系統的設施進行診斷及大型手術設施；及
- 基本上並非作為診所、療養院、休養或康復醫院或類似機構、為酗酒或吸毒人士提供服務的地方。

直系親屬 - 指受保人的配偶、父母、配偶的父母、祖父母、配偶的祖父母、兒子、女兒、兄弟、姊妹、孫或合法監護人。

傳染病 - 指政府公佈並需要實施隔離的任何種類的傳染病。

受傷 - 指完全及直接因意外但不包括任何疾病或自然發生的醫學情況或退化過程而對受保人造成的人身傷害。

投保人/保單持有人 - 指擁有有關保險保單的個別人士或商業實體/公司。

旅程 - 由受保人從香港出發開始直至受保人返回及重新進入香港境內為止。

喪失聽力 - 指永久喪失聽力而無法痊癒，令受保人雙耳完全失聰並不能透過手術或其他治療方式恢復聽力。

肢體 - 指手部或腳部。

失去肢體 - 指在手腕或足踝關節或其以上位置或整個手部、臀部、腳部或腿部完全及永久喪失功能。

喪失視力 - 指眼睛完全喪失視力而無法痊癒，令受保人完全失明並不能透過手術或其他治療方式恢復視力。

喪失語言能力 - 指無法發出說話所需的四種聲音中的三種，例如唇音、齒齶音、顎音及軟顎音，或聲帶完全喪失功能，或大腦控制說話的中樞受損導致語言失能症，令受保人完全喪失語言能力並不能透過手術或其他治療恢復語言能力。

喪失功能 - 指永久完全喪失功能就如完全喪肢及喪失器官相同。

受保成員/受保人 - 指保單附表/保險證明書內指名的受保人(一名或多名)。當受保人是一商業實體/公司，他們須被詮釋為「受保僱員」，惟他們的名字必須已被列於有關的保單附表/保險證明書內。

永久 - 指由意外發生當日起計連續12個月，於此段時間終結時，受傷情況沒有改善跡象。

永久完全傷殘 - 指由於受傷緣故，並且於發生意外當日起計連續12個月內，受保人完全及永久不能從事或履行任何業務或工作。假如受保人在受傷時並沒有受傷從事工作或職業，「永久完全傷殘」是指受保人不能進行其所有日常活動，惟有關傷殘情況必須已經連續12個月並由一名合格及獲發牌照/註冊醫生證明受保人將會在其餘生繼續永久完全傷殘。

公共交通工具 - 指任何由獲發牌照出租載客的公司或個別人士營運的機械驅動交通工具，只包括飛機、巴士、旅遊巴、小輪、氣墊船、水翼船、輪船、火車、電車或地下火車。

合格及獲發牌照/註冊醫生 - 指獲取醫學學士學位及獲發牌照或註冊執業行醫的醫生，並於其執業當地提供其獲發牌照及其所接受的訓練範圍以內的治療(單為治癒或減輕傷患而進行的手術或醫療程序)。

旅遊夥伴 - 指與受保人一同預訂或安排預訂旅程或預留座位，並在整個旅程中與受保人同行及同樣就同一旅程向本公司投保的人士。導遊或團友除外。

本公司/我們 - 指安盛保險有限公司。

地域限制

本公司提供的保險保障屬全球性質。

除非保單附表/保險證明書內特別註明，否則本保單只適用於由香港出發的旅程。

保險的運作

- 就各保障項目而言(下文所述的「第六節 - 遺失現金及旅遊證件」及「第九節 - 損失訂金或取消旅程」除外)，旅程是指保單附表/保險證明書內所述的受保期。受保期的開始由受保人離開其香港住所或營業地點(以較早者為準)展開旅程，直至受保人完成旅程返回其香港的住所或營業地點時完結。在任何情況下，除非另有說明，否則有關保險保障不會在超過預訂離境時間24小時前生效，而其屆滿則為(i)保單附表/保險證明書內列明的受保期屆滿時或(ii)預訂回港時間的24小時後或到達最終目的地時以較早者為準。
- 就「第六節 - 遺失現金及旅遊證件」而言，旅程的開始為(i)保單附表/保險證明書發出時或(ii)保單附表/保險證明書所述的受保期24小時前以較後者為準。
- 就「第九節 - 損失訂金或取消旅程」而言，旅程以保單附表/保險證明書發出時即時生效。
- 就單次旅程而言，最長保障期為184日。
- 就全年保障而言，保單規定每次旅程的最長保障期為90日，保單生效期間的旅遊次數不限。保單保障的完結為(i)受保期最後一日或(ii)受保人的最後一次旅程(有關旅程必須於受保期展開)結尾以較後者為準。

單段旅程保障備忘(只適用於單次旅程)

若受保人只投保單段旅程，保險保障的終止為原定到達最終目的地國家7日後或保單上原本聲明的受保期屆滿以較早者為準。

自動延長10日保障期備忘(只適用於單次旅程)

倘若受保人因不能避免的原因而須延長在出發前已經訂定的原本行程，本保險保障將會自動延長多達10日，受保人無須支付額外保費。

有關18歲以下受保人士備忘

就任何18歲以下而繳付成人保費的受保人而言，每名受保人根據第一節可獲的最高賠償額將會增加至所選擇計劃(a)項的100%，而根據第三節可獲的意外身故最高賠償額為所選擇計劃的50%，而並非第三節有關規定(i)原本規定的賠償額。

第一節 - 醫療及相關費用

每名受保人的最高賠償額	尊貴計劃	典雅計劃
(a) 70歲或以下受保人	\$1,000,000	\$500,000
(b) 70歲以上受保人	\$500,000	\$250,000
(c) 受保兒童	\$250,000	\$125,000

本公司將會賠償：

- 受保人在旅程中因直接由意外受傷或染病所引致的索償，並在當日起連續12個月內於香港境外必須支付所引致的醫療、住院及治療費用，包括牙科治療(只因意外導致的)費用。

安盛保險有限公司
AXA General Insurance Hong Kong Limited

「卓越」優遊樂
SmartTraveller Insurance

24小時全球緊急援助熱線
24-hour Worldwide Emergency Assistance Hotline

如需緊急支援，請致電
For immediate assistance, please call

(852) 2861 9285

(注意：跌打、針灸、物理治療或脊椎治療的最高賠償總額為\$3,000及每日每次治療限額為\$200)

- (2) 因受保人入院而按照醫生意見需要一名親屬或朋友前往受保人身處之地或逗留在受保人身邊所引致的合理額外住宿及交通費用（只限經濟客位）。

	尊貴計劃	典雅計劃
每名受保人的分項限額	\$40,000	\$20,000

- (3) 因受保人入院而導致與其同行子女無人照顧所引致的合理額外住宿費，及護送受保人該些子女返回受保人在香港的住所而引致的交通費用（只限經濟客位）。

	尊貴計劃	典雅計劃
每名受保人的分項限額	\$40,000	\$20,000

- (4) 若受保人在旅程中意外受傷或染病而入院所引致的入院保證金。

	尊貴計劃	典雅計劃
每名受保人的分項限額	\$40,000	\$40,000

- (5) 因受保人於旅程中在海外意外受傷或染病，導致受保人需要住院，於醫院內聘用當地翻譯員/傳譯員提供服務所引致的合理費用，惟住院期間必須超過24小時。

	尊貴計劃	典雅計劃
每名受保人的分項限額	\$5,000	\$5,000
每日限額	\$500	\$500

- (6) 受保人因在旅程中意外受傷或感染疾病而導致其原定的旅程日程/行程中斷或被打亂之後重新繼續該旅程日程/行程及/或與其原來的旅遊夥伴會合而招致的必須而合理的額外住宿及交通費用。

	尊貴計劃	典雅計劃
每名受保人的分項限額	\$5,000	\$3,000

- (7) 受保人從外地回港後連續3個月內在港必須支付的合理醫療、住院及治療費用(包括只因意外導致的牙科治療費用、私營救護車或專業上門護理費用)，而有關費用是由於受保人在海外的旅程中意外受傷或染病而必須在海外接受治療所致。

	尊貴計劃	典雅計劃
每名受保人因意外受傷的分項限額	最高賠償額為第一節的100%	
每名受保人因疾病的分項限額	最高賠償額為第一節的10%	

(注意：跌打、針灸、物理治療或脊椎治療的最高賠償總額為\$3,000及每日每次治療的限額為\$200)

本公司亦會賠償：

- (8) 每日住院現金津貼給在旅程中意外受傷或染病而需在海外住院超過24小時的受保人。任何受保人於抵返香港時入住香港的醫院超過24小時進行覆診亦可獲得此項保障。

	尊貴計劃	典雅計劃
每名受保人的分項限額	\$5,000	\$3,000
每日限額	\$500	\$300

- (9) 每日強制隔離現金津貼給受保人因在旅程中感染傳染病或懷疑感染傳染病而於海外或於旅程完結及返回香港後7日內被強制隔離。受保人在每次旅程中只可享用此項保障一次。

有關規定

- (i) 強制隔離必須由當地獲授權衛生部門或任何監管機關執行。此項保障並不包括自願隔離及/或家居隔離。
- (ii) 強制隔離每滿24小時，本公司便會支付每日現金津貼。
- (iii) 只會在以下所述情況受保人才可享有此項保障：受保人在旅程中被強制隔離第一日或之前，有關傳染病被世界衛生組織劃分為「流行病和大流行病預警和反應」的第5級別或以上，或受保人在香港被強制隔離第一日或之前，香港政府已經啟動「政府流感大流行應變計劃」的最高級別 - 緊急應變級別。
- (iv) 假如受保人出發當日或之前，其計劃前往的目的地已被宣佈為疫區，受保人將不獲此項保障。

	尊貴計劃	典雅計劃
每名受保人的分項限額	\$5,600	\$3,500
每日限額	\$800	\$500

(注意：受保人不可就同一事件根據第(8)及(9)分項保障提出索償。)

- (10) 受保人或其旅遊夥伴在旅程中乘坐郵輪時因嚴重意外受傷或嚴重染病，令受保人無法繼續其旅程而合理地引致的衛星電話通話費，惟受保人必須在旅程中斷後直接回港。

不受保範圍

- 1 未能提供衛星電話服務提供者發出的正式收據，作為受保人支付衛星電話通話費的證明。
- 2 未能取得及提供合格及獲發牌照/註冊醫生發出的書面報告，證明受保人或其旅遊夥伴乘坐郵輪時嚴重受傷或嚴重染病。

- 3 任何其他現有的保險計劃、政府計劃所保障的費用或將會獲郵輪、酒店、公共交通工具、旅行社或任何其他旅遊及/或住宿提供者的賠償或退款，或預定旅程費用當中已經包括的費用。
- 4 任何導致其旅程被打亂的情況，而有關情況在本保單的申請日期當日或之前(單次旅程)已存在；或在(i)本保單的申請日期前或(ii)就預訂有關旅程的日期前(全年保障)已經存在。

	尊貴計劃	典雅計劃
每名受保人的分項限額	\$3,000	\$1,500

附加保障

附加保障包括：

- (a) 假如受保人在旅程中意外受傷或感染疾病而需到海外醫院求診的額外交通費用(必須提供收據以作證明)，最高賠償額為\$500。
- (b) 受保人雖在海外並無招致任何醫療費用，但仍可獲賠償其在香港連續三個月接受合格及獲發牌照/註冊醫生提供治療期間所需支付予有關醫生的任何必須醫療費用，惟受保人必須於旅程期間感染有關傳染病，而該名合格及獲發牌照/註冊醫生的診斷亦證明受保人於旅途中感染該傳染病，及受保人在回港7日內被確診。最高賠償總額不會超過上述第(7)分項的限額。

不受保範圍

- 1 在香港接受的治療或協助(上述第(7)、(8)、(9)分項及附加保障(b)明確規定的保障除外)。
- 2 診治受保人的有關合格及獲發牌照/註冊醫生認為，受保人可合理地延遲至返回香港後才進行的手術或治療，或只投保單段旅程的受保人可合理地延遲至抵達最終目的地國家後才接受手術或治療。
- 3 除非診治受保人的有關合格及獲發牌照/註冊醫生認為受保人需要入住醫院、診所或療養院的單人或私人病房，否則本公司不會賠償入住有關病房的額外費用。
- 4 非由本地合格及獲發牌照/註冊醫生提供的醫療諮詢或(跌打中醫、針灸、物理治療或脊椎治療以外的)治療。
- 5 由作為跌打中醫師、針灸師、物理治療師或脊醫的受保人自己或受保人的親屬或受保人的直系親屬所提供的任何治療。

第二節 - 海外緊急援助服務

	尊貴計劃	典雅計劃
每名受保人的最高賠償額	全部開支	全部開支

本節所描述的服務必須因醫療上的緊急情況而必須使用，並由本公司委託的協助公司統籌(該「協助公司」)。

(1) 24小時緊急援助熱線服務

當受保人一旦遇上緊急醫療問題或情況，而有關問題或情況屬本保單承保範圍內，本公司將會為受保人提供24小時緊急援助熱線服務，以作出協助及提供意見。

(2) 緊急醫療救援

假如當地醫療服務不足或並無提供醫療服務，而在醫療上而言受保人的情況必須被緊急移送至另一地方，該協助公司將會作出有關安排，本公司亦會支付下列事宜所引致的費用：

- (i) 緊急運送包括以空中救護飛機將受保人送到因應其意外受傷或所感染疾病性質提供治療的最就近及最適當的醫院或醫療中心；及
- (ii) 按照合格及獲發牌照/註冊醫生的建議及/或指示給沿途陪伴受保人的醫療護理人員。

(3) 遣送回國/遣體運返

本公司會支付協助公司就下列事宜安排的服務費用：

- (i) 當受保人感染疾病或意外受傷，按照一名合格及獲發牌照/註冊醫生的書面建議必須立即乘搭飛機返回香港，因而需要額外支付的經濟客位機票費用。
- (ii) 按照一名合格及獲發牌照/註冊醫生的書面建議陪同受保人乘搭飛機返港的一名合格及獲發牌照/註冊醫生的經濟客位機票的額外費用。
- (iii) 倘若受保人死亡而在當地土葬或火化的合理費用或將每名受保人遺體或骨灰運返香港的合理費用。

不受保範圍

除第一節訂明的不受保範圍外，下列所述亦適用：

- 1 非由協助公司或其授權代表批准及安排的緊急醫療救援或遣返回國/遣體運返之費用，除非本公司行使完全酌情權及決定權擱置有關不受保範圍。
- 2 在香港下葬遺體的費用。

第三節 - 人身意外

如受保人於旅程中意外受傷，本公司會就下列各項向每名受保人作出賠償。

賠償表

	尊貴計劃	典雅計劃
每名受保人的最高賠償額	\$1,000,000	\$500,000

保障

賠償限額 (每名受保人的最高賠償百分率)

- | | |
|---------------------|------|
| (1) 意外死亡 | 100% |
| (2) 永久完全傷殘 | 100% |
| (3) 永久及無法治癒之四肢癱瘓 | 100% |
| (4) 雙眼永久完全失明 | 100% |
| (5) 一隻眼睛永久完全失明 | 100% |
| (6) 喪失兩肢或兩肢永久完全喪失功能 | 100% |
| (7) 喪失一肢或一肢永久完全喪失功能 | 100% |
| (8) 永久喪失說話能力及喪失聽力 | 100% |
| (9) 永久完全喪失聽力 | |
| (a) 雙耳 | 75% |
| (b) 一隻耳朵 | 20% |
| (10) 永久喪失說話能力 | 50% |

AXA Assistance (IPA) Worldwide Alarm Centre 安盛全球緊急援助中心

Hong Kong	香港	852 2861 9285
Singapore	新加坡	800 8523 636
Australia	澳洲	1800 467 856
U.S.A.	美國	1 866 654 4270
United Kingdom	英國	0800 051 7229



附加保障

附加保障範圍包括：

(a) 三級程度燒傷

假如受保人因意外受傷，並被一名合格及獲發牌照/註冊醫生診斷蒙受下列任何一項事故，本公司會就下列註明的事事故賠償給受保人。

事故	賠償限額	
三級程度燒傷	尊貴計劃	典雅計劃
45%或以上身體表面	\$200,000	\$100,000
27%或以上身體表面	\$120,000	\$60,000
18%或以上身體表面	\$100,000	\$50,000
9%或以上身體表面	\$60,000	\$30,000
4.5%或以上身體表面	\$40,000	\$20,000

本公司不會就同一宗意外而引起的燒傷事故，作出超過一項以上的賠償，本公司只支付賠償額最高的一項。

定義

- 「燒傷」指因熱力造成組織的破壞。
- 「程度」指發出本保單的地方當地政府慣用量度燒傷的單位。
- 「三級程度燒傷」指整個皮膚層的損害或破壞及對皮膚層下面組織的損害。

(b) 死亡恩恤賠償

本公司只會就受保人因意外或疾病死亡而賠償給受保人的受益人。

每名受保人的分項限額	尊貴計劃	典雅計劃
(a) 因意外死亡	\$50,000	\$25,000
(b) 因疾病死亡	\$20,000	\$10,000

(c) 信用咭保障

假如在旅程中受保人因意外受傷而直接造成或導致其死亡，本公司會賠償任何已故受保人在意外當日其信用咭的購物及雜項物品的結欠，惟有關意外死亡賠償必須是就同一宗意外而支付。

每名受保人的分項限額	尊貴計劃	典雅計劃
	\$50,000	\$30,000

(d) 失蹤

除非受保人所乘搭的船隻或飛機因沉沒或遇難而造成全損，否則不應因受保人失蹤而假設受保人意外死亡。本公司於收到受保人的遺產代理人簽署承諾書後，才會支付意外死亡賠償。假如後來發現受保人仍然生還，並沒有因有關意外而死亡，則有關的死亡賠償必須退還給本公司。

有關規定

- 就18歲以下的受保人而言，無論選擇任何計劃，其保障(1)的最高賠償額為\$100,000。
- 就70歲以上的受保人而言，本公司就本節支付的最高賠償額為上述保障(1)至(10)的50%。
- 本公司不會就下列情況支付賠償：
 - 除非保障(1)及(2)於意外日期起計12個月內發生，否則本公司不會就這兩項保障作出賠償；
 - 除非受保人能向本公司證明其傷殘情況從受傷日起計已連續存在12個月及受保人很可能會在其餘生繼續傷殘，否則本公司不會就保障(3)至(10)作出賠償。
- 本公司就受保人在旅途中因意外受傷而支付的保障(1)至(10)及附加保障(a)的最高賠償總額分別為 \$1,000,000 (尊貴計劃) 及 \$500,000 (典雅計劃)。
- 附加保障(c)的保障範圍並不包括累算利息或財務費用。
- 假如受保人可循任何其他途徑獲得附加保障(c)的賠償，本公司將不會就附加保障(c)支付賠償。
- 附加保障(c)並不適用於18歲以下受保人。
- 本節保障並不賠償因疾病、病患、任何既存身體或精神缺陷或衰弱、細菌傳染或病毒性感染，即使受保人因意外感染。但若因意外切傷或傷口導致細菌感染除外。
- 當受保人在遭受本保單保障的傷害之前一肢已存在部份功能障礙或部份傷殘，而該肢因有關傷害而完全喪失功能或完全傷殘，本公司有絕對權利根據因有關傷害而導致的傷殘程度決定應支付給受保人的賠償額的百分率。如受保人在遭遇有關傷害而喪失或永久完全喪失一肢功能之前，該肢已經存在百分比功能障礙或完全傷殘，本公司不會就此支付賠償。

第四節 - 行李及個人財物

	尊貴計劃	典雅計劃
每名受保人的最高賠償額	\$25,000	\$15,000
每件物品/每對/套物品的賠償限額	\$7,500	\$5,000
每部手提電話或平板電腦的賠償限額	\$3,000	\$2,000

(但只限其中一部)

本公司將會賠償受保人擁有並親自攜帶、預先寄運或於旅途中購買的行李(包括受保人穿著或佩帶的、擺放在大行李箱、手提箱、容器及相關的衣服及個人財物)在旅程中的遺失或損毀。

假如受保人或受保人購買與其遺失物品的品牌、款式及狀況差不多的替代品，本公司只會賠償該替代品的費用，惟受保人或受保人購買該遺失物品的日期距離遺失該物品當日必須少於兩年。假如受保人或受保人未能證明何時購買該遺失物品或受保人或受保人已購買該物品超過兩年或假如受保人或受保人並未購買該物品的替代品，本公司將會以該物品的固有價值或維修該物品的費用(以較少者為準)作為評估有關索償的基礎。

假如證明任何物品的維修費並不合乎經濟原則，本公司會把有關物品視作已經遺失去評估索償。

本公司可選擇以現金或以維修方式或替代品彌償受保人或受保人的損失或損壞。假如投保財產是在公共交通工具的保管或控制下遺失或損壞，受保人應先向該公共交通工具進行索償。

假如受保人或受保人並未獲得有關公共交通工具支付全數賠償，本公司將會支付有關餘額，惟賠償額以本保單本節的規定金額為限。

一對及一套條款

當投保項目包含一對或一套物品時，在不參考其作為該一對或一套物品的其中一部份可能具有特別原因的情況下，本公司根據本節支付的最高賠償額將不會超過可能遺失的一個或多個部份的價值，亦不會超過一個與該對或該套物品的投保價值成正比的金額。

不受保範圍

- 因海關或其他官方的延誤或被其充公或扣留而引致的遺失或損毀。
- 郵票、文件、隱形眼鏡或隱蔽鏡片的遺失或損毀，或易碎、脆弱物品如玻璃或水晶的損毀。
- 貨物或貨辦的遺失或損毀。
- 因正常損耗、逐漸退化或機械或電力故障或擾亂造成的損失或損毀。
- 在公共交通工具保管期間發生的遺失或損毀，除非發現有關遺失或損毀時即向有關公共交通工具作出報告，如有關公共交通工具為航空公司，則必須取得資產損失報告。
- 未有於24小時內向警方報案，並取得遺失物品確認書，除非：
 - 不可能取得該報告
 - 向警方報告及取得遺失物品確認書會引起另一宗根據本保單另一項目提出的索償。
- 鈔票、國庫券、外幣票據或任何其他形式的可轉讓票據/文件的遺失或損毀。
- 補領信用卡費用。
- 因無人看管以致財物遺失。
- 記錄在錄音帶、碟、軟盤或手提電腦內的數據遺失及復原數據的費用。
- 由於同一原因而根據「第五節 - 行李延誤」提出遺失的索償。
- 任何使用中的運動器材的損壞。

第五節 - 行李延誤

每名受保人的分項限額	尊貴計劃	典雅計劃
	\$1,000	\$800

本公司將會賠償受保人因航空公司或運輸公司的處理不當或劫持事件而從抵達海外目的地後超過最少6小時短暫未能取回行李而導致需購買基本物品或衣服或必需品應急的費用。

有關規定

- 所有索償必須提交以公共交通工具發出的書面確認，有關交通工具是航空公司，則必須取得一份資產損失報告，當中述明延誤時數及理由。

不受保範圍

- 由於同一原因而根據「第四節 - 行李及個人財物」提出的遺失索償。
- 並非與受保人在同一公共交通工具上的任何行李或另行郵寄或運送的紀念品及物品。

第六節 - 遺失現金及旅遊證件

每名受保人的最高賠償額	尊貴計劃	典雅計劃
	\$6,000	\$4,000

(a) 個人金錢

本公司將會賠償投保人或受保人遺失其擁有的金錢(包括現金、鈔票或外幣票據、支票、旅行支票、郵政匯票或匯票)，或任何與受保人無關或並非受保人同住的人在未獲受保人授權下使用受保人擁有的信用卡的損失。

每名受保人的分項限額	尊貴計劃	典雅計劃
	\$3,000	\$2,000

(b) 旅遊證件

本公司將會賠償受保人在投保旅程中意外遺失其旅遊證件，包括護照、香港身份證或類似的、適用的入境簽證、信用卡、駕駛執照、外遊票券及其他旅遊證件之補領費用。假如受保人在旅程中遺失其外遊票券及/或其他旅遊證件，本公司亦會賠償受保人因此而支付的額外交通費及/或住宿開支，惟有關的交通等級及/或房間類別不可優於該旅程中原本的交通等級及/或房間類別。

每名受保人的分項限額	尊貴計劃	典雅計劃
	\$3,000	\$2,000

不受保範圍

- 於遺失現金及/或旅遊證件後24小時內未有向當地警方報失或未有取得有關警方就該些遺失的現金及/或旅遊證件發出的報告。
- 由於錯誤、疏忽、兌換或貶值而造成的損失。
- 因海關或其他官方的延誤或被其充公或扣留而引致的遺失或損毀。
- 遺失旅行支票而未有即時向發出有關旅行支票的機關在當地的分行或代理報告。
- 任何原因不明或神秘的消失。
- 遺失信用卡而未有即時向發卡機構在當地的分行或代理報告。
- 未有遵守發卡機構發出有關信用卡的條款向有關發卡機構報失有關信用卡。
- 遺失任何種類的會員證。
- 遺失任何並非完成旅程必須的旅遊證件及/或簽證及/或外遊票券。
- 因受保人不補領或遲補領文件而需支付的任何罰款或罰金。
- 就同一旅遊證件的臨時證及永久證提出的申索。假如遺失有關證件，受保人只可就其中一種性質的證件提出索償。

第七節 - 個人責任

每名受保人的最高賠償額	尊貴計劃	典雅計劃
(包括所有訴訟費及開支在內)	\$3,000,000	\$1,500,000

本公司會彌償受保人所選計劃的最高限額給受保人在旅程中因下列情況而導致其須向第三者所負的法律責任：

- 意外受傷(包括死亡)。
- 意外遺失或損毀財物。

此外，本公司亦會就下列情況彌償受保人：

- (3) 第三者可循普通法或有關意外遺失或損毀發生地的法律向受保人追討訴訟費及開支；及
- (4) 受保人在事先獲得本公司書面同意下支付的訴訟費及開支。

不受保範圍

直接或間接因下列情況引致、與下列情況有關或由於下列情況造成的索償：

- 1 作為僱主的法律責任、合約上的法律責任或對受保人的家人、旅遊夥伴的法律責任。
- 2 屬於一名受保人的財物或以信託形式持有的一名受保人財物或由一名受保人照管、看管或管轄的財物。
- 3 任何蓄意、惡意或非法行為。
- 4 從事貿易、業務或職業。
- 5 土地或樓宇的業權或佔用(任何只屬暫住性質的佔用除外)。
- 6 車輛、飛機或船隻(小型非機動帆船、獨木舟、小艇之類除外)的擁有權、管有權或使用。
- 7 因任何刑事訴訟而導致的法律費用、罰款、罰金或之類。
- 8 受保人處於受藥物或酒精影響的情況。

第八節 - 旅程延誤、更改行程、行程誤點及超額訂票

	尊貴計劃	典雅計劃
每名受保人的最高賠償額	\$10,000	\$5,000

本公司將會賠償以下(a)、(b)及(c)項如因直接由下列情況而起：

罷工或其他工業行動、騷亂、暴亂、劫持事件、恐怖主義活動、惡劣天氣、自然災難、公共交通工具的機械及/或電路故障或機場關閉。

(a) 旅程延誤

假如受保人原訂乘搭的公共交通工具較原定的出發或抵步時間延誤了最少6小時，本公司會作出賠償。

延誤的時間將由以下其中一個情況開始計算：

- 出發時間的延誤 - 受保人行程內訂明的公共交通工具的原定出發時間直至(i)原本的公共交通工具或(ii)由該公共交通工具提供首先可接載受保人的另一種運輸工具的實際出發時間；或
- 抵步時間的延誤 - 受保人行程內訂明的公共交通工具的原本預定抵步時間直至(i)原本的公共交通工具或(ii)由該公共交通工具提供首先可接載受保人的另一種運輸工具的實際抵步時間。

受保人只可就同一公共交通工具的出發時間延誤或抵步時間延誤的其中一項提出索償。假如受保人有連續而相銜接的航班，每段延誤時間不可累積及延誤的近因必須為上述理由。

	尊貴計劃	典雅計劃
每名受保人的分項限額	\$2,500	\$2,000
每滿6小時	\$300	\$250

(b) 因旅程延誤而需額外支付的住宿費用或已繳付而不能取回的訂金或費用

本公司會賠償受保人原訂乘搭的公共交通工具的出發或過境時間較受保人原本的行程內所訂時間延誤超過6小時或受保人取消其假期/旅程，因而在香港境外招致的：

- (i) 額外、合理而不能取回的住宿費，或
- (ii) 已繳付而不能取回的訂金或費用或為受保人的利益而約訂的未付訂金或費用。

受保人只可就上述(i)或(ii)其中一項提出索償。

	尊貴計劃	典雅計劃
每名受保人的分項限額	\$3,000	\$2,000

(c) 因旅程延誤而需要更改行程的額外支付費用

假如受保人在辦理登記手續後，其原訂的公共交通工具延誤了超過6小時而取消，受保人因而需要乘搭另一種公共交通工具前往其原本行程內訂明的目的地而額外支付且不能取回的外遊票券(只限經濟客位)的費用。受保人只能在每次旅程中獲享此項保障一次。

	尊貴計劃	典雅計劃
每名受保人的分項限額	\$10,000	\$5,000

(d) 行程誤點

假如受保人已獲確認其所預留的公共交通工具座位，但因其錯過了相銜接的運輸而未能登上該公共交通工具，而受保人未獲該公共交通工具或任何第三者提供住宿及膳食或補償，本公司會賠償受保人因此而支付的合理開支。因錯過行程中相銜接交通工具而未能登上有關公共交通工具必須由該公共交通工具以書面證明屬實。

	尊貴計劃	典雅計劃
每名受保人的分項限額	\$10,000	\$5,000

(e) 超額訂票

假如受保人已獲確認其所預留的公共交通工具座位，但因超額訂票而未能登上該公共交通工具，而受保人未獲該公共交通工具或任何第三者提供住宿及膳食或補償，本公司將會賠償受保人因此而支付的合理開支。因超額訂票而未能登上有關公共交通工具必須由該公共交通工具以書面證明屬實。

	尊貴計劃	典雅計劃
每名受保人的分項限額	\$10,000	\$5,000

不受保範圍

因下列情況引致索償：

- 1 受保人未能按照其原定的行程辦理登記手續，亦未能取得有關公共交通工具(或他們負責處理有關事宜的代理)就有關延誤時數及理由發出的書面確認。
- 2 任何導致該旅程延誤，而有關情況在本保單的申請日期當日或之前(單次旅程)已存在；或在(i)本保單的申請日期前或(ii)就預定有關旅程的日期前已經存在或已宣佈。

- 3 受保人在辦理乘搭飛機/船/車的登記手續後遲了到達機場、港口、火車站或其他登機/船/車地點(因受保人能力控制範圍以外的事件造成的遲到除外)。
- 4 任何未經有關交通工具、旅行社或其他相關機構核實的行程改動而蒙受損失。
- 5 任何其他保險計劃、政府計劃所提供的保障或將會獲旅行社、旅遊經營商或其他任何預定行程一部分(a)旅程延誤除外)的服務提供者的賠償或退款。
- 6 因同一原因而根據「第十節 - 提早結束旅程」索償的損失。

第九節 - 損失訂金或取消旅程

	尊貴計劃	典雅計劃
每名受保人的最高賠償額	\$50,000	\$25,000

假如在本保險生效後出現下列情況，本公司將會賠償受保人因事先已繳付或按照所簽訂合約受保人需支付而不能取回的訂金或費用：

- (i) 旅程出發日期之前7日內打算前往的目的地發生不可預見的罷工、騷亂、暴亂、恐怖活動、劫持事件、自然災難或惡劣天氣。
- (ii) 旅程出發日期之前7日內受保人在香港的主要居所發生火災、水災或被爆竊引致嚴重損毀，受保人因而需要在旅程出發當日留港協助警方調查。
- (iii) 旅程出發日期之前7日內，香港特別行政區政府按照「外遊警示制度」對受保人打算前往的目的地發出「紅色」或「黑色」警示(儘管受「一般不受保範圍1A(iii)」的限制)。在「紅色」警示發出的情況下，本公司會賠償最多50%已預先繳付而不能取回的訂金或費用。
- (iv) 受保人、其直系親屬、緊密商業夥伴或同行旅遊夥伴身故、嚴重受傷或患嚴重疾病。
- (v) 受保人需出庭作供、出任陪審員或接受強制性隔離。
- (vi) 獲旅行代理商註冊主任發牌並是香港旅遊業議會會員並已獲投保人及/或受保人繳付旅行訂金或旅費的旅行代理商破產。

不受保範圍

參閱「第十節 - 提早結束旅程」所述的不受保範圍(適用於「第九節」及「第十節」)。

第十節 - 提早結束旅程

	尊貴計劃	典雅計劃
每名受保人的最高賠償額	\$50,000	\$25,000

假如受保人因下列情況而需在已經展開旅程以後放棄旅程並返回香港，本公司會根據受保人損失的預訂行程以完整日數按比例計算，賠償受保人預訂發票上所示其已就預訂行程繳付而未經使用及不能取回的有關旅費，或需額外支付的合理交通費(只限經濟客位)及住宿費：

- (i) 受保人打算前往的目的地發生不可預見的罷工、騷亂、暴亂、恐怖活動、劫持事件、自然災難或惡劣天氣，令受保人無法繼續其原定旅程。
- (ii) 受保人在香港的主要居所發生火災、水災或被爆竊引致嚴重損毀。
- (iii) 在旅程中，香港特別行政區政府按照「外遊警示制度」對受保人打算前往的目的地發出「紅色」或「黑色」警示(儘管受「一般不受保範圍1A(iii)」的限制)。在「紅色」警示發出的情況下，本公司會就本節規定的事項上賠償最多50%已繳付而不能取回的費用或額外費用及開支。
- (iv) 受保人、其直系親屬、緊密商業夥伴或同行旅遊夥伴身故、嚴重受傷或患嚴重疾病。
- (v) 獲旅行代理商註冊主任發牌並是香港旅遊業議會會員並已獲投保人及/或受保人繳付旅行訂金或旅費的旅行代理商破產。

本公司就被沒收的已繳付旅費及/或交通費及/或住宿費而應賠償的提早結束旅程金額，將會根據行程中斷後餘下旅程日數按比例計算。

受保人只可就提早結束旅程而被沒收的旅費或額外支付的費用其中一項提出索償。

不受保範圍(適用於「第九節」及「第十節」)

直接或間接因下列情況引起、與下列情況有關或因下列情況導致的索償：

- 1 任何政府的規管管制或行為、任何旅行社、旅遊經營商、公共交通工具及/或其他構成預訂行程一部分的服務提供者的破產清盤、錯誤、疏忽或失責，除上述明確規定的獲發牌旅行代理商的破產外。
- 2 投保人或任何受保人不願繼續旅程或其他經濟因素所引致的情況。
- 3 任何受保人前往有關旅程的非法行為或被刑事起訴，按傳召出庭令出席作供者除外。
- 4 受保人發覺需要取消或提早結束旅程時沒有即時通知有關旅行社、旅遊經營商、公共交通工具及/或其他構成預訂行程一部分的服務提供者。
- 5 任何導致該旅程取消或提早結束的情況，而有關情況在本保單(單次旅程)申請日期當日或之前已經或在(i)本保單的申請日期前或(ii)就預訂有關旅程的日期前已經存在或已宣佈。
- 6 任何在本保單申請日期當日或之前(單次旅程)或在(i)本保單的申請日期前或(ii)就預訂有關旅程的日期前已知存在的身體狀況或其他已知情況。
- 7 任何將會獲現有的保險計劃、政府計劃或公共交通工具、旅行社或任何其他運輸及/或住宿提供者賠償或退款。
- 8 任何未獲有關公共交通工具、旅行社或其他相關機構核實的取消或提早結束行程而蒙受的損失。
- 9 未能向合格及獲發牌照/註冊醫生取得書面醫療報告。
- 10 任何由另一方提供的服務所招致而受保人無責任支付的費用及/或任何預定旅費當中已經包括的費用。
- 11 假如受保人拒絕遵照合格及獲發牌照/註冊醫生的建議並自行決定返回香港，或受保人在獲提供有關醫療建議時其身體狀況適宜旅行但受保人拒絕繼續有關旅程而導致的損失(只適用於「第十節 - 提早結束旅程」)。
- 12 有關根據「第八節 - 旅程延誤、更改行程、行程誤點及超額訂票」提出的損失索償(只適用於「第十節 - 提早結束旅程」)。
- 13 任何訓練或學習課程費用及/或訂金。

第十一節 - 家居財物保障

	尊貴計劃	典雅計劃
每名受保人的最高賠償額	\$20,000	\$10,000

假如受保人離港旅遊期間，其在港的空置主要居所因任何意外失火及/或爆竊事件而對該居所內的設備造成實質損害或損毀，本公司將會以現金彌償受保人，對有關損害或損毀作出維修或恢復原狀，賠償方式由本公司選擇。

「設備」指傢具及陳設、屬於受保人或長期與受保人同住的家庭成員或家庭僱傭的衣服及個人財物及受保人擁有的裝置及裝修(由受保人自行負責)而並非屬於業主的裝置及裝修。設備並不包括契據、債券、匯票、承付票、支票、旅行支票、款項的抵押、任何種類文件、現金、外幣票據、黃金、銀或其他珍貴金屬製品、珠寶、皮草、腕錶及珍貴或半珍貴寶石。

假如任何一對或一套財物的其中一部分遺失或損毀，本公司須支付的最高賠償額為該對或該套財物價值上的比例部分。本公司就任何一件物品或一對或一套物品支付的最高賠償額為\$2,000。

不受保範圍

本公司不會就直接或間接因下列情況引起、與下列情況有關或由於下列情況導致的情況提供賠償：

- 任何物品的損耗、折舊、清潔、染色、維修或修復、光線作用或氣候的情況、蟲蛀、昆蟲、害蟲或任何其他逐漸發揮作用的情況引起的損失。
- 因受保人的蓄意行為或受保人的縱容而導致任何損失或損毀。
- 因投保財產或其任何部分被政府機關充公、徵用、扣留或有關財物或任何具有有關財物的處所、車輛或物件被合法或非法佔用而造成的損失(無論暫時或永久)。
- 電力或機械故障。
- 用作商業或專業用途的攝影及體育設備及配件及樂器。
- 汽車、小船、單車及任何有關的設備或配件。

第十二節 - 創傷輔導

	尊貴計劃	典雅計劃
每名受保人的最高賠償額	\$25,000	\$15,000
每日每次賠償限額	\$1,500	\$1,000

受保人在旅程中因目睹或親歷一宗創傷性事件(只包括強姦、持槍搶劫、襲擊、自然災難或恐怖主義行為)，而需接受輔導治療，本公司會支付由合法及獲發牌照/註冊醫生建議受保人接受的創傷輔導的費用。

第十三節 - 租用自負額

	尊貴計劃	典雅計劃
每名受保人的最高賠償額	\$5,000	\$3,000

受保人在旅程中駕駛一輛租車途中發生碰撞或該車輛被盜或在停泊時損毀，本公司會賠償受保人就有關損失而需承擔的汽車保險自負額，惟：

- 該車輛必須是從領有牌照的汽車租賃公司租來；及
- 受保人與該領有牌照的汽車租賃公司簽訂了租用協議；及
- 有一份相關的綜合汽車保險保單於有關出租期內保障該出租車輛。

不受保範圍

- 在車輛出租期內，受保人因受到酒精或藥物影響而控制該租來的車輛出現的任何情況。
- 在違反租用協議或有關的綜合汽車保險的條款的情況下操作該出租車輛而導致的損失。
- 在車輛出租期內，受保人作出任何非法或不合法使用該出租車輛。
- 受保人並沒持有該國家的有效駕駛執照。
- 該出租車輛的損失或損毀以外的責任。
- 租用下列類型車輛：摩托車、摩托自行車、小型摩托車、拖車或旅行拖車、露營車、卡車、商用車輛、野營車、越野車、客貨車及超過9個座位的車輛。

第十四節 - 中國住院按金保證保障

(只適用於已列明在保險證明書或保險附表內)

假如受保人於旅程中意外受傷或染病而入住中國大陸任何一間網絡醫院，只要受保人向該醫院出示中國住院按金保證咭(下稱「中國咭」)，協助公司便會代表本公司向該網絡醫院作出住院按金保證。

有關規定

- 此保障只適用於中國大陸境內及受保人居住國家以外地方適用。
- 受保人必須向網絡醫院的職員出示其中國咭及身份證或其姓名及相片的任何相關旅遊證件。協助公司會代表受保人向該網絡醫院作出住院按金保證。
- 當受保人出院時，受保人或其代表必須直接全數清繳其醫療開支包括協助公司作出的住院按金保證。
- 如欲查詢最最近的網絡醫院，受保人可致電24小時緊急援助熱線(852) 2861 9285。受保人必須提供下列資料以供核實：資料包括但不限於受保人姓名、保單號碼、受保人或其代表的聯絡電話、受保人身處地點及有關意外/疾病的簡單描述及受保人要求提供協助的性質。一旦確認受保人可享有有關保障，協助公司便會轉介受保人到一所網絡醫院。
- 協助公司將會竭盡全力為受保人尋找中國境內的醫療設施。據理解受保人將獲協助公司轉介的醫生、醫院及任何種類的專業人士均屬獨立承辦商而非協助公司的僱員、代理人或受僱人，他們必須為自己的行為負責。由協助公司轉介並獲受保人選用的醫院或醫生亦須作為其所提供醫療服務的主要參與人。本公司及協助公司將不會就他們所提供的醫療服務中出現的任何過失負責。
- 假如遺失該中國咭或該中國咭損毀，受保人應盡快以書面向本公司報告。本公司將會於收取受保人或投保人支付補領該咭的費用\$50後向受保人補發新咭。

定義

- 「中國」指中華人民共和國，不包括香港特別行政區及澳門特別行政區。
- 「網絡醫院」指參與協助公司的網絡醫院計劃及接受本公司發出的中國咭及會容許受保人在沒有支付住院按金的情況下入院的中國大陸的醫院網絡。受保人可登入本公司網站www.axa.com.hk參考網絡醫院名單。
- 「居住國家」指香港特別行政區。

一般不受保範圍

1 本保單不會就下列情況作出賠償：

- 直接或間接因下列情況引致、因下列情況而發生或由於下列情況而致的索償：
 - 前往有關旅程之前已受的傷患、已患有的疾病、已存在的病患、既有的虛弱情況及身體上的缺陷或情況。
 - 受保人以職業身份參與體育運動或活動。
 - 戰爭、侵略、外敵行為、敵對行為或軍事行動(無論有否宣戰)、內戰、叛變、暴亂、具備民眾起義特質或構成民眾起義的民眾騷亂(除非於個別的分節註明)、軍事起義、起義、叛亂、革命、軍事或篡奪力量、軍法統治、由任何政府或公共或地方當局或根據任何政府或公共或地方當局的命令而對財產充公或國有化或徵用或造成的毀壞或損毀。
 - 受保人直接參與恐怖主義行動。
 - 當受保人正在參與速度比賽(賽跑除外)、汽車拉力賽及競賽或飛行活動(若受保人是支付費用的乘客，乘搭獲認可的多引擎載客飛機於持牌營運期間在空中運載乘客，並配備持有適當牌照的機組人員時除外)。
 - 蓄意自我傷害或令自己患病、精神失常、受酒精影響(暫時或其他方面)、或使用藥物(根據獲處方治療及在註冊醫生指導下服用而非用作戒毒治療的藥物除外)、令自己暴露於不需要的嚴重風險(試圖拯救人類生命或財產除外)。
 - 因非恐怖主義事件引致的(無論直接或間接)核分裂、核聚變或輻射污染。
 - 任何更為明確地投保的財產或任何若非本保單的存在可透過其他保險保單獲得賠償的索償。
 - 可能導致索償而本公司在該旅遊行程完結日後的31日內未有獲書面直接通知的事件。
 - 受保人未有遵照醫生建議或為了獲得醫學治療或為了移民所進行的旅程而引致的索償。
 - 就性病或性傳播疾病包括愛滋病(後天免疫缺乏症)及愛滋病相關綜合徵提出的索償。
 - 就懷孕、流產、分娩及其所有併發症提出的索償。
 - 如受保人在受保期參與任何種類的勞動或體力工作；參與海上活動例如商業潛水、石油鑽探、採礦或空中攝影；處理爆炸品；作為男/女演員進行演出；作為工地工人、漁民、廚師或廚房工人；導遊或領隊。
 - 由於在
 - 保險附表/保險證明書發出(適用於單次旅程)；或
 - 預定行程當日(適用於全年保障)之前已經存在的，按照「外遊警示制度」對受保人打算前往的目的地發出「黑色」警示的情況引致的索償。
 - 在預定行程當日或之前及/或保單生效日期前已經存在或宣佈或為公眾所知的任何事件/情況。
- 制裁責任限制及除外條款
保險人不得視為提供任何保險，及不會承擔任何賠償或提供任何利益之責任，若就所提供的保險及支付任何賠償款項或利益責任可能使保險人受到聯合國決議的任何制裁、禁令或限制、或遭受歐盟、英國或美國的貿易或經濟制裁，或違反歐盟、英國或美國的法律或法規。

一般條款

- 遵守條款
投保人、受保人、或其任何代表適當地遵循及履行本保單內所有有關投保人、受保人、或其任何代表應進行或遵從的條款，為本公司根據本保單有責任作出任何賠償的先決條件。
- 合理程度的謹慎
投保人或受保人應審慎地行事及採取合理程度的謹慎防止意外、受傷、疾病、損失或損毀的情況發生。
- 欺詐行為
假如任何索償屬欺詐或蓄意誇大性質，或假若投保人作出任何虛假聲明或申述，本保單將會作廢，而本公司亦將不會考慮任何索償。
- 索償
假如出現索償情況，投保人或受保人應：
 - 盡快以書面通知本公司，但必須符合「一般不受保範圍」第1C項。
 - 提供本公司可能要求提供的所有文件、資料及證據，而有關費用將由投保人、受保人或其法律代表支付。
 - 當受保人的行李在運輸機構保管的情況下遺失或損毀或受保人遺失行李或金錢，受保人必須向有關運輸機構、警方或其他適當的機關索取一份報告，並於向本公司提出索償時提供該報告的副本。
 - 假如出現旅程延誤，請向有關的公共交通工具索取書面確認書，當中述明延誤原因及時間。
 - 假如遺失金錢，必須於發現有關遺失後24小時內向警方報案並取得報告。
 - 除非獲本公司書面同意，否則不可承認任何責任或作出申述或對其他投保人或受保人具約束力的承諾。
 - 在進行有關索償的調查或評估期間提供全面的合作。
- 本公司對於索償的權利
本公司有權以投保人或受保人名義代表其處理任何法律訴訟的抗辯或和解，並為本公司利益着想自費但以投保人或受保人名義提出訴訟，就任何本保單保障範圍內的情況向任何第三者追討賠償，及為此目的而委託本公司選用的律師。假如受保人身故，本公司將有權自費進行驗屍。

- 6 仲裁
假如雙方對於根據本保單需支付的賠償額出現分歧（另行承認責任問題），有關分歧將交由一名由雙方按照香港現有法例條文委任的仲裁員處理。
當按照本條款就任何分歧進行仲裁時，仲裁員作出裁決是投保人向本公司提出訴訟的先決條件。
- 7 保費
保單附表/保險證明書一旦發出（全年保障除外），受保人將不獲退還已支付的保費。
- 8 支付索償款項
本公司將會根據可能於本保單內訂明與與投保人或受保人身故的彌償有關並作出有關彌償時生效的條文，向指定受益人作出有關彌償。假如沒有指定受益人或沒有當時生效的條文可備，有關彌償將會支付予投保人或受保人的遺產權益人。本公司可選擇將任何在投保人或受保人身故時仍未支付的累算彌償支付予有關受益人或有關遺產權益人。所有其他彌償將會支付予投保人或受保人。
當指定受益人或（假如沒有指定受益人或假如作出合理查詢後未能尋獲有關受益人）投保人或受保人的管理人或遺產代理人獲支付有關賠償後，本公司將獲免除所有其於本保單下的進一步法律責任，而本公司無論如何都不會負責處理任何根據本保單支付的賠償運用或分配。
就索償支付的款項將以損失發生當日的對換滙率為基礎。
- 9 本保單必須受香港法律規限並根據香港法律詮釋，而任何因本保單引起的爭議或分歧必須根據香港法律解決。
- 10 只適用於全年保障
- (a) 取消保單
本公司可透過掛號方式將發給投保人的信件寄往其最後告知我們的地址，予以投保人30日通知期取消本保單。在此情況下，投保人將可按比例獲退還其仍未屆滿的受保期相應的部分保費。
投保人亦可以書面通知給予本公司30日通知期取消本保單。然後本公司會向投保人退還（於當前的受保期必須沒有出現索償情況）仍未屆滿的受保期保費，保費退還額最高為投保人已支付全年保費的一半。
- (b) 額外受保人
除非被明確列為受保人並已附於本保單的書面簽註證明有關情況，否則被額外加入保單附表內任何組別的人均不能享有本保單提供的保障。
- (c) 額外保費
額外保費將會以本保單的受保期生效後或本保單續期時（家庭計劃除外）加入本保單的額外受保人人數而按比例收取。
- (d) 續保
本保單續保前，受保人必須通知本公司其於之前的受保期內有否發覺其患有疾病或身體毛病或虛弱情況。
- 11 年齡限制
受保人的年齡必須介乎出生後30日至85歲。
就全年保障而言，受保人必須在保單最初生效日前為75歲或以下，並可續保至80歲。
本公司將會根據受保人於受保期生效日的年齡提供所有保障。
- 12 重複保障
假如受保人就同一旅程向本公司購買超過一份旅遊保險（所有實際上由任何公司、團體或組織付款為受保人投保的團體旅遊保險除外），本公司就有關損失負責賠償的最高金額將為賠償限額最高的保單內所訂金額。
- 13 合約（第三者權利）條例
任何不是本保單某一方的人士或實體，不能根據《合約（第三者權利）條例》（香港法例第623章）強制執行本保單的任何條款。
- 14 每一分項的總賠償額將不會超過保單內各分節分別訂明的最高賠償額。

收集個人資料的聲明

安盛保險有限公司（下稱“本公司”）明白其就《個人資料（私隱）條例》（香港法例第486章）（“條例”）收集、持有、處理、使用和/或轉移個人資料所負有的責任。本公司僅為合法和相關的目的收集個人資料，並將採取一切切實可行的步驟，確保本公司所持個人資料的準確性。本公司將採取一切切實可行的步驟，確保個人資料的安全性，及避免發生未經授權或者因意外而擅自取得、刪除或另行使用個人資料的情況。敬請注意，如果閣下不向本公司提供閣下的個人資料，我們可能無法提供閣下所需的資料、產品或服務，或無法處理閣下的要求。

目的：本公司不時有必要收集閣下的個人資料（包括信用資料和以往申索紀錄），並可能因下列各項目的（“有關目的”）而供本公司使用、存儲、處理、轉移、披露或共享該等個人資料：

- 向閣下推介、提供和營銷本公司、安盛集團的其他公司（“安盛關聯方”）或本公司的商業合作夥伴（參閱下文“在直接促銷中使用及將其個人資料提供予其他人士”部份）之產品/服務，以及提供、維持、管理和操作該等產品/服務；
- 處理和評估閣下就本公司及安盛關聯方所提供之產品/服務提出的任何申請或要求；
- 向閣下提供後續服務，包括但不限於執行/管理已發出的保單；
- 與就本公司和/或安盛關聯方提供的任何產品/服務而由閣下或針對閣下提出的或者其他涉及閣下的任何索賠相關的任何目的，包括索賠調查；
- 偵測和防止欺詐行為（無論是否與就由本公司及/或安盛關聯方提供的產品/服務有關）；
- 評估閣下的財務需求；
- 為客戶設計產品/服務；
- 為統計或其他目的進行市場研究；
- 不時就本條款所列的任何目的核對所持有的與閣下有關的任何資料；
- 作出任何適用法律、規則、規例、實務守則或指引所要求的披露或協助在香港或香港以外其他地方的警方或其他政府或監管機構執法及進行調查；
- 進行身份和/或信用核查和/或債務追收；
- 遵守任何適用的司法管轄區的法律；
- 開展與本公司業務經營有關的其他服務；及
- 與上述任何目的直接有關的其他目的。

個人資料的轉移：個人資料將予以保密，但在遵守任何適用法律條文的前提下，可提供給：

- 位於香港或香港以外其他地方的任何安盛關聯方、本公司的任何相關聯人士、任何再保險公司、索賠調查公司、閣下之保險經紀、行業協會或聯會、基金管理公司或金融機構，以及就此方面而言，閣下同意將閣下的資料轉移至香港境外；
- 與就本公司和/或安盛關聯方提供的任何產品/服務而由閣下或針對閣下提出的或者其他涉及閣下的任何索賠相關的任何人士（包括私家偵探）；
- 在香港或香港以外其他地方向本公司和/或安盛關聯方提供行政、技術或其他服務（包括直接促銷服務）並對個人資料負有保密義務的任何代理、承包商或第三方；
- 信貸資料機構或（在出現拖欠還款的情況下）追討欠款公司；
- 本公司權利或業務的任何實際或建議的承讓入、受讓方、參與者或次參與者；
- 在香港或香港以外其他地方的任何政府部門或其他適當的政府或監管機關；及
- 在有合理需要履行任何上述有關目的段落2, 3, 4及5之情況下，以下人士：保險理算人、代理和經紀、僱主、醫護專業人士、醫院、會計師、財務顧問、律師、整合保險業申訴和承保資料的組織、防欺詐組織、其他保險公司（無論是直接地，或是通過防欺詐組織或本段中指名的其他人士）、警察、和保險業就有資料而對所提供的資料作出分析和檢查的數據庫或登記冊（及其運營者）。

如欲了解本公司為促銷目的使用閣下的個人資料的政策，請參閱下文“**在直接促銷中使用及將其個人資料提供予其他人士**”部份。

閣下的個人資料將僅為上文中規定的一個或多個有關目的而被轉移。

在直接促銷中使用及將其個人資料提供予其他人士

本公司有意：

- 使用本公司不時持有的閣下的姓名、聯絡資料、產品及服務的組合資料、交易模式及行為、財政背景及人口統計數據以進行直接促銷；
- 就本公司、安盛關聯方、本公司合作品牌夥伴及商業合作夥伴可能提供關於下列類別的服務及產品而進行直接促銷（包括但不限於提供獎賞、客戶或會員或優惠計劃）：
 - 保險、銀行、公積金或公積金計劃、金融服務、證券和相關產品及服務；
 - 健康、保健及醫療、餐飲、體育運動及會員服務、娛樂、健身浴或類似的休閒活動、旅遊及交通、家居、服裝、教育、社交網絡、媒體的產品及服務及高級消費類產品；
- 以上服務及產品將會由本公司及/或以下機構提供：
 - 任何安盛關聯方；
 - 第三方金融機構；
 - 提供上文2.所列之服務及產品之本公司及/或安盛關聯方的商業合作夥伴或合作品牌夥伴；
 - 向本公司或任何以上所列機構提供支援的第三方獎賞、客戶或會員或優惠計劃提供者；
- 除由本公司促銷上述服務及產品外，本公司亦有意將上文1.段部份所述的資料提供予上文3.段部份所述的全部或任何人士，以供該等人士在促銷該等服務及產品中使用，而本公司為此目的須獲得客戶書面同意（包括表示不反對）。

在使用閣下的個人資料作上文所述的目的或提供予上文所述的人士之前，本公司須獲得閣下的書面同意，及只在獲得閣下的書面同意後方可使用閣下的個人資料及提供予其他人士作任何推廣及促銷用途。

閣下日後可撤回閣下給予本公司有關使用閣下的個人資料及提供予其他人士作任何促銷用途的同意。

閣下如欲撤回閣下給予本公司的同意，請發信至下文“**個人資料的查閱和更正**”部份所列的地址通知本公司。本公司會在收取任何費用的情況下確保不會將閣下納入日後的直接促銷活動中。

個人資料的查閱和更正：根據條例，閣下有權查閱本公司是否持有閣下的個人資料，獲取該資料的副本，以及更正任何不準確的資料。閣下還可以要求本公司告知閣下本公司所持個人資料的種類。

查閱和更正的要求，或有關獲取政策、常規及本公司所持的資料類型的資料，均應以書面形式發送至：

香港黃竹坑黃竹坑道38號安盛匯5樓
安盛保險有限公司
個人資料保護主任

本公司可能會向閣下收取合理的費用，以抵銷本公司為執行閣下的資料查閱要求而引致的行政和實際費用。

本公司對客戶的關懷

本公司-安盛保險有限公司-致力為所有保單持有人提供高質素服務。假如在任何時候，本公司所提供的服務未達閣下預期的水平，閣下可從以下途徑反映意見：

- 閣下應先與閣下的保險代理或經紀聯絡。閣下亦可選擇向負責處理閣下保單的安盛保險經理反映意見。
- 假如閣下與上述人士接觸後認為需要進一步協助，請致函：

安盛保險有限公司
行政總裁
香港黃竹坑黃竹坑道38號安盛匯5樓

本公司將會於兩個工作天內致函閣下，確認收到閣下的投訴，之後便會就閣下的投訴展開調查。假如我們有閣下的電話號碼便會致電聯絡閣下。

- 安盛保險有限公司是保險投訴局的成員。假如閣下的投訴與索償有關，而經過上述程序之後，閣下的索償仍未能獲得圓滿解決，閣下可致函保險投訴局，地址如下：

保險投訴局
香港灣仔
駱克道353號
三湘大廈29樓

本公司已簽訂協議，假如保險投訴局決定本公司在處理閣下的索償時有不合理或技術上不正確的情況，他們的決定將對本公司具有約束力。

重要事項 - 請緊記在任何與本公司的通訊中註明閣下的保單號碼。

註：所有金額均以港元計算。

此中文譯本只供參考之用，如有歧異，概以英文版本為準。

簽注 - 人身意外升級保障

(只適用於已列明在保險證明書或保險附表內)

雙方謹此注意到及同意，鑒於額外保費的支付，「第三節 - 人身意外」所列的「賠償表」及「有關規定」已被刪除並被下列代替。

賠償表

	尊貴計劃	典雅計劃
每名受保人的最高賠償額	\$1,000,000	\$500,000

保障	賠償限額 (每名受保人的最高賠償百分率)
(1) 意外死亡	100%
(2) 永久完全傷殘	100%
(3) 永久及無法治癒之四肢癱瘓	100%
(4) 雙眼永久完全失明	100%
(5) 一隻眼睛永久完全失明	100%
(6) 喪失兩肢或兩肢永久完全喪失功能	100%
(7) 喪失一肢或一肢永久完全喪失功能	100%
(8) 永久喪失說話能力及喪失聽力	100%
(9) 永久及無法治癒之精神錯亂	100%
(10) 永久完全喪失聽力	
(a) 雙耳	75%
(b) 一隻耳朵	20%
(11) 永久喪失說話能力	50%
(12) 永久完全喪失一隻眼睛的晶狀體	50%
(13) 喪失四隻手指及大拇指或永久完全喪失其功能	
(a) 右手	70%
(b) 左手	50%
(14) 喪失四隻手指或永久完全喪失其功能	
(a) 右手	40%
(b) 左手	30%
(15) 喪失一隻大拇指或永久完全喪失其功能	
(a) 兩個右骨節	30%
(b) 一個右骨節	15%
(c) 兩個左骨節	20%
(d) 一個左骨節	10%
(16) 喪失手指或永久完全喪失其功能	
(a) 三個右骨節	15%
(b) 兩個右骨節	10%
(c) 一個右骨節	7.5%
(d) 三個左骨節	10%
(e) 兩個左骨節	7.5%
(f) 一個左骨節	5%
(17) 喪失腳趾或永久完全喪失其功能	
(a) 一隻腳的所有腳趾	20%
(b) 大趾兩個骨節	7.5%
(c) 大趾一個骨節	5%
(d) 任何其他腳趾	3%
(18) 腿部或膝蓋骨折並被確定不能癒合	15%
(19) 腿部縮短至少5厘米	10%
(20) 就不屬於保障(2)至(19)(首尾兩項包括在內)的傷殘情況，本公司有絕對權利決定是否支付一筆賠償金予受保人，而有關賠償金的金額必須由本公司根據有關傷殘的程度計算，並以本公司認為有關傷殘並無抵觸保障(2)至(19)(首尾兩項包括在內)傷殘情況為基礎。	

定義

「傷殘」是指列於上述「賠償表」的任何一項或多項傷殘情況(包括意外死亡)而有關傷殘情況必須因受保人遭受的傷害而導致。

「喪失手指或腳趾」是指掌骨與指骨關節之間或以上被完全切除或距骨與趾骨關節之間或以上被完全切除。

有關規定

- (i) 就18歲以下的受保人而言，無論選擇任何計劃，其保障(1)的最高賠償額為\$100,000。
- (ii) 就70歲以上的受保人而言，本公司就本節支付的最高賠償額為上述保障(1)至(20)的50%。
- (iii) 本公司不會就下列情況支付賠償：
 - (a) 除非保障(1)及(2)於意外日期起計12個月內發生，否則本公司不會就這兩項保障作出賠償；
 - (b) 除非受保人能向本公司證明其傷殘情況從受傷日起計已連續存在12個月及受保人很可能會在其餘生繼續傷殘，否則本公司不會就保障(3)至(20)作出賠償。
- (iv) 假如受保人為左撇子，根據「賠償表」保障(13)至(16)(首尾兩項包括在內)應支付的「右手」及「左手」的賠償金額應該對調。
- (v) 假如受保人喪失一肢及同一肢的一隻或多隻腳趾或一隻或多隻手指或一肢及同一肢的一隻或多隻腳趾或一隻或多隻手指永久完全喪失功能，因而導致本公司須根據「賠償表」支付賠償，受保人將只能獲支付「賠償表」內有關「喪失一肢或一肢永久完全喪失功能」的賠償。
- (vi) 如支付給受保人的賠償總金額等同或超過每名受保人的最高賠償限額，本公司將不會再就同一名受保人於將來遭受的傷害根據本保單支付賠償。如支付給受保人的賠償總金額少於每名受保人的最高賠償限額，列於「賠償表」適用於該名受保人的傷殘情況的賠償額應減少至仍未繳付的原本投保金額。
- (vii) 當受保人在遭受本保單保障的傷害之前一肢或一個器官已經存在部份功能障礙或部份傷殘，而該肢或器官因有關傷害而完全喪失功能或完全傷殘，本公司有絕對權利根據因有關傷害而導致的傷殘程度決定應支付給受保人的賠償額的百分率。如受保人在遭遇有關傷害而喪失或永久完全喪失一肢或一個器官的功能之前，該肢或器官已經存在百分比功能障礙或完全傷殘，本公司不會就此支付賠償。
- (viii) 本公司就受保人在旅途中因意外受傷(一項或多項)而支付的所有保障(1)至(19)及附加保障(a)的最高賠償額分別為\$1,000,000(尊貴計劃)及\$500,000(典雅計劃)。
- (ix) 附加保障「(c) - 信用咭保障」的保障範圍並不包括累算利息或財務費用。
- (x) 假如受保人可循任何其他途徑獲得附加保障「(c) - 信用咭保障」的賠償，本公司將不會就附加保障「(c) - 信用咭保障」支付賠償。
- (xi) 附加保障「(c) - 信用咭保障」並不適用於18歲以下受保人。
- (xii) 本節保障並不賠償因疾病、病患、任何既存身體或精神缺陷或衰弱、細菌傳染或病毒性感染，即使受保人因意外感染。但若因意外切傷或傷口導致細菌感染除外。

除以上規定亦須符合本保單的條件、條款及不受保範圍條款。

註：所有金額均以港元計算。此中文譯本只供參考之用，如有歧異，概以英文版為準。