

GROUP DELUXE

FOR CONSUMER GROUPS



TRAVEL INSURED INTERNATIONAL
A CRUM & FORSTER COMPANY

SCHEDULE OF INSURANCE COVERAGE AND OTHER NON-INSURANCE SERVICES

Trip Cancellation*	Trip Cost**
Cancel for Work Reasons Covered for cancellation due to work-related reasons in addition to job loss	
Trip Interruption*	150% of Trip Cost**
Travel Delay – 6 hours	\$750 (\$150/day)
Missed Connection – 3 hours	\$500
Baggage/Personal Effects	\$1,500
Baggage Delay – 24 hours	\$400
Accident & Sickness Medical Expense	\$50,000
Emergency Evacuation & Repatriation	\$250,000
Cancel for Any Reason (CFAR)***	Optional
Non- Insurance Worldwide Emergency Assistance Services	Included

* For \$0 Trip Cost, there is no Trip Cancellation and Trip Interruption is limited to \$500 return air only

** Up to the Trip Cost insured, up to a maximum of \$20,000 per person

*** CFAR coverage is 75% of the nonrefundable trip cost. CFAR is optional and available for individuals or your entire group. Trip cancellation must be 48 hours or more prior to scheduled departure. CFAR must be purchased at the time of plan purchase and within 14 days of your initial trip deposit. **This benefit is not available to residents of New York State.**

PER PERSON RATES

Cost of Trip	Rates	With CFAR*	Cost of Trip	Rates	With CFAR*
\$0	\$21	N/A	\$4,501-\$5,000	\$319	\$478.50
\$1-\$300	\$33	\$49.50	\$5,001-\$5,500	\$353	\$529.50
\$301-\$500	\$39	\$58.50	\$5,501-\$6,000	\$388	\$582.00
\$501-\$1,000	\$58	\$87.00	\$6,001-\$6,500	\$422	\$633.00
\$1,001-\$1,500	\$93	\$139.50	\$6,501-\$7,000	\$485	\$727.50
\$1,501-\$2,000	\$115	\$172.50	\$7,001-\$7,500	\$519	\$778.50
\$2,001-\$2,500	\$145	\$217.50	\$7,501-\$8,000	\$537	\$805.50
\$2,501-\$3,000	\$172	\$258.00	\$8,001-\$8,500	\$561	\$841.50
\$3,001-\$3,500	\$194	\$291.00	\$8,501-\$9,000	\$595	\$892.50
\$3,501-\$4,000	\$242	\$363.00	\$9,001-\$9,500	\$623	\$934.50
\$4,001-\$4,500	\$276	\$414.00	\$9,501-\$10,000	\$665	\$997.50

The above rates are for trips up to 30 days – for each day over 30 add \$5.00 per person per day.

All of the above rates are for the plan which includes insurance and non-insurance services.

*Cancel for Any Reason (CFAR) benefit not available to residents of New York State

Travel Insured International
1-800-243-3174 option 6
groups@travelinsured.com
www.travelinsured.com

GENERAL LIMITATIONS AND EXCLUSIONS

Insurance benefits are not payable for the following: resulting from suicide, attempted suicide or any intentionally self-inflicted injury while sane or insane (states may vary); due to a mental or nervous condition, unless hospitalized; resulting from an act of declared or undeclared war; while participating in maneuvers or training exercises of an armed service; while riding, driving or participating in races, or speed or endurance contests; while mountaineering (engaging in the sport of scaling mountains generally requiring the use of picks, ropes, or other special equipment); while participating as a member of a team in an organized sporting competition; while participating in skydiving, hang gliding, bungee cord jumping, scuba diving or deep sea diving; while piloting or learning to pilot or acting as a member of the crew of any aircraft; received as a result or consequence of being Intoxicated, as specifically defined in the Certificate, or under the influence of any controlled substance unless administered on the advice of a Legally Qualified Physician; to which a contributory cause was the commission of or attempt to commit a felony or being engaged in an illegal occupation; due to normal childbirth, normal pregnancy through the first 9 months of pregnancy or voluntarily induced abortion; for dental treatment (except as coverage is otherwise specifically provided herein); which exceed the Maximum Benefit Amount for each attached coverage as shown in the Schedule of Coverage and Services: or; due to a Pre-existing Condition, as defined in the Certificate. The Pre-existing Condition Limitation does not apply to: (a) Emergency Medical Evacuation, Medical Repatriation and Return of Remains coverage; or (b) to coverage purchased prior to Your final Trip payment.

The following limitation applies to Trip Cancellation: All cancellations must be reported directly to the Travel Supplier within 72 hours of the event causing the need to cancel, unless the event prevents it, and then as soon as is reasonably possible. If the cancellation is not reported within the specified 72 hour period, the Company will not pay for additional charges, which would not have, been incurred had You notified the Travel Supplier in the specified period. If the event prevents You from reporting the cancellation, the 72-hour notice requirement does not apply; however, You must, if requested, provide proof that said event prevented him or her from reporting the cancellation within the specified period.

Additional Limitations and Exclusions Specific to Baggage and Personal Effects

Benefits are not payable for any loss caused by or resulting from: breakage of brittle or fragile articles; wear and tear or gradual deterioration; confiscation or appropriation by order of any government or custom's rule; theft or pilferage while left in any unlocked vehicle; property illegally acquired, kept, stored or transported; Your negligent acts or omissions; or property shipped as freight or shipped prior to the Scheduled Departure Date.

ADMINISTRATION:

1. All Group Plans must be pre-booked with Travel Insured prior to collecting trip deposit payments.
2. You will be provided Plan Documents electronically to distribute to your group members; it is your responsibility to provide each participant with a copy upon purchase of the plan.
3. One form of payment with the group manifest (name list) is due no later than the 15th of the month prior to the date of departure. Individual forms of payment will not be accepted. Payments can be made to Travel Insured International with your credit card by calling 800-243-3174, option 6, or by mailing a check to Travel Insured, P.O. Box 6503, Glastonbury, CT 06033, Attn. Group Department. Please email your manifest with the form provided to the Group Department at groups@travelinsured.com. You may also fax the form to 860-528-8005.
4. A Group is defined as 10 or more insured passengers on the same policy, traveling to the same destination with shared core travel dates.
5. You must protect the full nonrefundable trip cost of each traveler in the group trip.

Purchase up to final Trip Payment for Pre-Existing Condition Waiver!

The Pre-Existing Condition Exclusion will be waived if the protection plan is purchased before final trip payment for the trip, for the full non-refundable cost of the trip and the booking for the covered trip is the first and only booking for this travel period and you are not disabled from travel at the time you pay the premium.

This document contains highlights of the plan. The plan contains insurance benefits underwritten by the United States Fire Insurance Company. C&F and Crum & Forster are registered trademarks of United States Fire Insurance Company. The Crum & Forster group of companies is rated A (Excellent) by AM Best Company 2016. The plan also contains non-insurance Travel Assistance Services that are provided by an independent organization, and not by United States Fire Insurance Company or Travel Insured International. Coverages may vary and not all coverage is available in all jurisdictions.

DETAILS OF COVERAGE

Insurance benefits will be paid up to the Maximum Benefit Amount purchased to cover You for the Published Penalties and unused non-refundable prepaid expenses for Travel Arrangements when You are prevented from taking or completing Your Covered Trip due to:

- a) Death involving You or Your Traveling Companion or You or Your Traveling Companions Business Partner or Your Family Member;
- b) A covered Sickness or Injury involving You, Your Traveling Companion or Business Partner, or Your Family Member which necessitates Medical Treatment at the time of cancellation and results in medically imposed restrictions, as certified by a Legally Qualified Physician, which prevents Your participation in the Covered Trip;
- c) You or Your Traveling Companion being hijacked, quarantined, required to serve on a jury (notice of jury duty must be received after the Effective Date) served with a court order to appear as a witness in a legal action in which You or Your Traveling Companion is not a party (except law enforcement officers);
- d) You or Your Traveling Companion's principal place of residence being rendered uninhabitable by fire or flood or burglary of primary residence within 10 days of departure;
- e) You or Your or Traveling Companion being directly involved in a traffic accident, which must be substantiated by a police report, while en route to an Insured's scheduled point of departure;
- f) Bankruptcy or Default of Your tour operator or travel supplier (other than the tour operator or travel agency from whom You purchased Your travel arrangements) which stops service more than 14 days following Your Effective Date. This benefit only applies if the Certificate has been purchased within 14 days of Your initial payment for the Covered Trip and for the full cost of the Covered Trip.
- g) Unannounced strike that causes complete cessation of services of Your Common Carrier for at least 18 consecutive hours;
- h) Weather that causes complete cessation of services of Your Common Carrier for at least 18 consecutive hours;
- i) Natural disaster at the site of Your destination, which renders Your destination accommodations uninhabitable;
- j) Felonious Assault on You or on Your Traveling Companion within 10 days of the scheduled Departure Date;
- k) You or Your Traveling Companion is in the Military and called to emergency duty for a national disaster other than war;
- l) Employer termination or layoff affecting You or a person(s) sharing the same room with You during Your Covered Trip. Employment must have been with the same employer for at least 3 continuous years;
- m) A Terrorist Incident that occurs in a city listed on the itinerary of Your Covered Trip and within 30 days prior to Your Scheduled Departure Date. This same city must not have experienced a Terrorist Incident within the 90 days prior to the Terrorist Incident that is causing Your cancellation of the Covered Trip. Benefits are not provided if the Travel Supplier offers a substitute itinerary;
- n) Your family or friends living abroad with whom You were planning to stay are unable to provide accommodations due to life threatening illness, life threatening injury or death of one of them;
- o) Your normal pregnancy or attending the childbirth of Your Family Member. The pregnancy must occur after the Plan Effective Date and be verified by medical records;
- p) The primary or secondary school where You or Your Dependent Children attend must extend operating session beyond the pre-defined school year, due to Unforeseen events commencing during Your plan effective period and the travel dates for Your Trip fall within the period of the school year extension. Extensions due to extra-curricular or athletic events are not covered;
- q) Mandatory evacuation ordered by local authorities at Your destination due to hurricane or other Natural Disaster. You must have 50% or less of Your Trip remaining at the time the mandatory evacuation ends, in order for this benefit to be payable;
- r) A transfer of You or Your Traveling Companion by the employer by whom You or Your Traveling Companion are employed on Your Effective Date which requires their principal residence to be relocated;
- s) You or Your Traveling Companion are required to work during the scheduled Trip. You or Your Traveling Companion must demonstrate proof of requirement to work, such as a notarized statement signed by an officer of Your or Your Traveling Companion's employer;
- t) You or Your Traveling Companion's company is directly involved in a merger or acquisition. You or Your Traveling Companion must be an active employee of the company that is merging and You or Your Traveling Companion must be directly involved in such an event;
- u) You or Your Traveling Companion's company operations are interrupted by fire, flood, burglary, vandalism, product recall, Bankruptcy or Financial Default.

Travel Delay: The Insurer will reimburse You for covered expenses on a one time basis, up to the maximum shown in the Schedule of insurance and other coverages, if You are delayed en route to or from the covered Trip for 6 or more hours due to a covered reason.

Baggage/Personal Effects: The Insurer will reimburse You up to the maximum shown on the Schedule of insurance and other coverages for loss, theft, or damage to Baggage and Personal Effects. The Insurer will pay the lesser of the following: Actual Cash Value at the time of the loss, less depreciation as determined by the Insurer, or the cost of repair or replacement.

Emergency Accident and Sickness Medical Expense: The Insurer will pay benefits up to the maximum shown on the Schedule of insurance and other coverages, if You incur Covered Medical Expenses for Emergency Medical Treatment as a result of an Accidental Injury which occurs on the covered Trip or a Sickness which first manifests itself during the covered Trip.

Emergency Medical Evacuation: The Insurer will pay, subject to the limitations set out herein, up to the maximum shown on the Schedule of insurance and other coverages, for Covered Emergency Evacuation Expenses reasonably incurred if the Insured suffers an Injury or Emergency Sickness that warrants the Insured's Emergency Evacuation while on a Trip.

Cancel For Any Reason Protection: Optional Coverage applies only when requested on the application and the appropriate additional plan cost has been paid. CFAR must be purchased at the time of plan purchase and within 14 days of your initial trip deposit. If You purchase the Cancel For Any Reason protection and You cancel Your Trip for any reason not otherwise covered by this plan, the Insurer will reimburse You for up to 75% of the prepaid, forfeited, non-refundable payments or deposits You paid for Your Trip provided You cancel Your Trip more than 48 hours prior to your Scheduled Departure Date. This benefit is not available to residents of New York State.

CONSUMER GROUP DELUXE SUBMISSION FORM



USE THIS FORM TO PRE-BOOK YOUR GROUP, PRIOR TO FIRST TRIP PAYMENT

Date:		
Agency/Company Name:		
Contact:	Phone:	
Address:	Fax:	
City:	State:	Zip:
Email: (email must be provided so electronic confirmation and plan documents can be sent)		
Group/Tour Name:		
Departure date:	Return Date:	
(For multiple trips attach separate page with scheduled travel dates)		
Deposit Date:	Destination: (include to and from)	
Estimated number of passengers: (All consumer group plans require a minimum of ten insureds per policy)		
Payment method: <input type="checkbox"/> Check <input type="checkbox"/> Credit Card		
IMPORTANT: You are responsible for distribution of the Plan Documents to the Participants at the time of plan purchase. A PDF version will be emailed to you upon registering the group plan.		

Group Administration Department

Phone: 1.800.243.3174, option 6

Email: groups@travelinsured.com

All Group Plans must be pre-booked prior to first sale.

Travel Insured International
1-800-243-3174 option 6
groups@travelinsured.com
www.travelinsured.com