中銀集團保險有限公司
BANK OF CHINA GROUP INSURANCE COMPANY LIMITED

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Important Note:

Prior to applying for travel insurance, it is essential that you carefully read the **"Latest News"** section of BOCG Insurance's website for the latest information on specific travel-related incidents and our coverage arrangements for these events.

GREATER BAY AREA TRAVEL INSURANCE PLAN POLICY

Whereas the Policyholder by a proposal and declaration which shall be the basis of this contract and is deemed to be incorporated herein has applied to BANK OF CHINA GROUP INSURANCE COMPANY LIMITED *(hereinafter called "the Company")* for the insurance hereinafter contained and has paid the premium as consideration for such insurance.

Now this Policy witnesses that subject to the terms, exclusions, conditions, limit of liability contained herein, affixed hereto or endorsed herein (all of which are deemed to be incorporated herein and collectively referred to as the Terms of this Policy), the Company agrees to indemnify the Insured Person in respect of any or all the contingencies hereinafter mentioned happening during the Period of Insurance and for each Journey (except as otherwise specified under this Policy).

Provided always that the due observance and fulfilment by the Policyholder or Insured Person or anyone acting on his/her behalf insofar as they relate to anything to be done or complied with by the Policyholder or Insured Person of all the conditions contained or incorporated herein shall be a condition precedent to any liability on the part of the Company under this Policy.

For the purpose of this Policy and where the context permits, words importing the singular number only also include the plural and vice versa and save for the word Policyholder, words importing the masculine gender only also include the feminine and vice versa.

PART I – GENERAL DEFINITIONS

Any of the following words and expressions to which a specific meaning has been attached in the Policy, the Schedule/Insurance Certificate, endorsement and any memoranda shall bear such specific meanings wherever it may appear.

1.	**"Accident"** or **"Accidental"**	means an unforeseen and unintended event occurring entirely beyond one's control, caused by violent, external and visible forces, leading to bodily injury or death.

2. **"Act of Terrorism"** means an act, including but not limited to the use of force or violence and/or the threat thereof, of any person or group(s) of persons, whether acting alone or on behalf of or in connection with any organisation(s) or government(s), committed for political, religious, ideological or similar purposes including the intention to influence any government and/or to put the public, or any section of the public, in fear.

3. **"Adult"** means a person Aged eighteen (18) to one hundred (100).

4. **"Age"** or **"Aged"** means the age last birthday of the Insured Person on the commencement date of the Period of Insurance and if the same shall be less than one (1), Age or Aged means the attained age in weeks of the Insured Person on the commencement date of the Period of Insurance.

5. **"Bodily Injury"** means bodily injury sustained in an Accident directly and independently of any other cause, and not by sickness, disease or gradual physical or mental disorder.

6. **"Child"** means all the dependent, unmarried and legitimate child(ren), including stepchild(ren) and legally adopted child(ren), of the Policyholder or Adult Insured Person. For a Child insured under this Policy, he/she must be Aged from six (6) weeks to seventeen (17) and residing in the Policyholder's or Adult Insured Person's household, and for the entire Journey is:

   (1) travelling with the Adult Insured Person (who must be his/her parent); or
   (2) travelling under the custody care of an Adult (applicable to minor who is insured on a standalone basis and/or who is travelling for the purpose of short-term study trip).

7. **"Chinese Medicine Practitioner"** means a person who is duly registered with the Chinese Medical Council of Hong Kong in accordance with the Chinese Medicine Ordinance (Cap. 549 of the Laws of Hong Kong), but excluding the Insured Person, Policyholder, an insurance intermediary, or an employer, employee, Immediate Family Member or business partner of the Policyholder and/or Insured Person.

8. **"Close Business Partner"** means a business associate who has a share in the Insured Person's business.

9. **"Compulsory Quarantine"** means the Insured Person is compulsorily confined in an isolated ward of a Hospital or an isolated site appointed by the government for at least twenty-four (24) consecutive hours and continuously stays in such location until his/her discharge from the quarantine.

10. **"Dangerous Activities"** means sightseeing or rides on a hot-air balloon, helicopter, light aircraft or aircraft (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), bungee jumping, hang-gliding, parachuting, rafting, speed-boating, jet-skiing, trekking at an altitude not greater than five thousand (5,000) meters above sea level, mountaineering (requiring the use of ropes or guides), rock-climbing, scuba diving, underwater activities requiring the use of artificial breathing apparatus, and any other activities of similar hazard levels as determined by the Company.

11. "Emergency Service Provider" means the third party organisation or entity designated by the Company for delivering emergency assistance and support services to the Insured Person as outlined in Part II Section 9 - 24-hour Emergency Assistance Services and Benefits.

12. "Family" means the Adult Insured Person's immediate family which includes themselves, their Spouse and Child named in the Schedule/Insurance Certificate or the subsequent endorsement to this Policy.

13. "Guangdong-Hong Kong-Macau Greater Bay Area" refers to Hong Kong, Macau, Guangzhou, Shenzhen, Zhuhai, Foshan, Zhongshan, Dongguan, Zhaoqing, Huizhou and Jiangmen.

14. "Hong Kong" means the Hong Kong Special Administrative Region of the People's Republic of China.

15. "Hospital" means an establishment duly constituted and registered as a hospital under the laws of the relevant territory in which it is established, and which:

(1) operates primarily for the reception and medical care and treatment of sick, ailing or injured persons on an inpatient basis;
(2) admits inpatient only under the supervision of a Medical Practitioner or Medical Practitioners one of whom is available for consultation at all times;
(3) maintains organised facilities for medical diagnosis and treatment of such persons, and provides (where appropriate) facilities for major surgery within the confines of the establishment or in facilities controlled by or available to the establishment;
(4) provides full-time nursing service by and under the supervision of a staff of nurses; and
(5) maintains a legally licensed Medical Practitioner in residence.

For the purpose of this definition, a Hospital shall not include the following:

(1) a mental institution; an institution confined primarily to the treatment of psychiatric disease including sub-normality; the psychiatric department of a Hospital;
(2) a place for the aged; a rest home; a place for drug addicts or alcoholics; and
(3) a health hydro or nature cure clinic; a nursing or convalescent home; a special unit of a Hospital used primarily as a place for drug addicts or alcoholics, or as a nursing, convalescent, rehabilitation, extended-care facility or rest home.

16. "Immediate Family Member" means a person's Spouse, parents, grandparents, children, siblings, grandchildren, legal guardians, parents-in-law or grandparents-in-law.

17. "Insurance Certificate" means the insurance certificate attached to and forms part of this Policy.

18. "Insured Person" means

(1) an Adult, his/her Spouse or Family and/or Child named as an "Insured Person" in the Schedule/ Insurance Certificate or the subsequent endorsement to this Policy; or
(2) an Adult employee named in the Schedule/ Insurance Certificate or the subsequent endorsement to this Policy if the Policyholder is a business

entity or company.

19.	**"Journey"**	means trips to be taken outside Hong Kong for travelling within the Guangdong-Hong Kong-Macau Greater Bay Area during the Period of Insurance. Such trip shall begin from the time when the Insured Person leaves his/her place of residence or business in Hong Kong (whichever is later) for travelling in a direct route to an immigration counter in Hong Kong; and end at the time when the Insured Person returns to his/her place of residence or business in Hong Kong (whichever is earlier) by travelling in a direct route from an immigration counter in Hong Kong. The longest duration of the journey must not exceed 31 days.
20.	**"Limit of Indemnity Table"**	means the maximum limits of the covered benefit items that the Company is liable to pay under this Policy.
21.	**"Loss of Sight of One Eye" / "Loss of Sight of Both Eyes"**	means the complete and irrecoverable and irremediable loss of the sight of an eye/both eyes.
22.	**"Loss of Hearing"**	means total, permanent and irrecoverable loss of hearing rendering the Insured Person absolutely deaf in both ears, which is irremediable by surgical or other means of treatment.
23.	**"Loss of One Limb" / "Loss of Both Limbs"**	means loss by physical severance or total and permanent loss of use of a hand/both hands at or above the wrist(s) or of a foot/both feet at or above the ankle(s).
24.	**"Loss of Speech"**	means total, permanent and irrecoverable loss of speech, which is irremediable by surgical or other means of treatment.
25.	**"Major Burns"**	means the third-degree burns that have caused full thickness skin destruction and which cover at least 10% of the total body surface area.
26.	**"Medical Practitioner"**	means a person (i) who is duly registered with the Medical Council of Hong Kong in accordance with the Medical Registration Ordinance (Cap. 161 of the Laws of Hong Kong) or, for jurisdictions outside Hong Kong, with a body of equivalent standing, and (ii) is legally authorised to provide medical and surgical service as a practitioner of medicine in the locality where the treatment is provided, but excluding the Insured Person, Policyholder, an insurance intermediary, or an employer, employee, Immediate Family Member or business partner of the Policyholder and/or Insured Person.
27.	**"Medical Treatment Expenses"**	means the actual expenses paid by the Insured Person to a Medical Practitioner or Hospital for medical, surgical or nursing treatment including the costs of medical supplies, ambulance hire or professional home-nursing fees, but excluding the cost of dental care and treatment unless such treatment is for emergency and necessitated by accidental injuries to sound natural teeth. Such expenses must be incurred based on the recommendations of a Medical Practitioner but shall not exceed the reasonable and customary charges applicable for the services rendered.
28.	**"Period of Insurance"**	means the period when the Insured Person commence the Journey until the time of completion of the Journey, subject to the maximum duration of Journey as stated thereof. While for "Cancellation" under Section 8 in PART II, cover shall be effective immediately as from date of insurance application.

29.	**"Permanent Total Disablement"**	means absolute continuous disablement from engaging in or giving alteration to any gainful occupation or carrying out normal duties in daily life for twelve (12) calendar months and at the end of that time being beyond hope of improvement.
30.	**"Personal Notebook Computer"**	means a laptop, notebook, sub-notebook computer or tablet personal computer.
31.	**"Pet"**	means a cat or dog legally owned by the Insured Person, which is not kept for commercial, breeding, or competitive purposes, and habitually resides at the Insured Person's primary place of residence in Hong Kong.
32.	**"Pet Hotel/Boarding Establishment"**	means a facility licensed under the Public Health (Animals) (Boarding Establishment) Regulations (Cap. 139I of the Laws of Hong Kong).
33.	**"Policy"**	means the complete policy contract between the Policyholder, the Insured Person and the Company, including these Terms, the Schedule/Insurance Certificate issued hereunder, any endorsement or memoranda made thereto, together with all related documents including the application, proposal, declaration and/or beneficiary designation form submitted or provided by the Policyholder or the Insured Person or his/her authorised representatives.
34.	**"Policyholder"**	means an individual or business entity who owns this Policy and named as the "Policyholder" in the Schedule/Insurance Certificate or the subsequent endorsement to this Policy.
35.	**"Pre-existing Condition"**	means injury, sickness, disease or medical condition which existed before the Period of Insurance in respect of an Insured Person and which presented signs or symptoms of which the Insured Person was aware or should have reasonably been aware.
36.	**"Public Conveyance"**	means any bus, coach, taxi, ferry, hovercraft, hydrofoil, ship, train, tram, High Speed Rail or underground train provided and operated by a carrier duly licensed for the regular transportation of fare-paying passengers, and any aircraft provided and operated by an airline or an air charter company which is duly licensed for the regular transportation of fare-paying passengers, and any regularly scheduled airport limousine operating on fixed routes and schedules.
37.	**"Public Place"**	means any location that is accessible to the general public, including Public Conveyance.
38.	**"Schedule"**	means the schedule attached to and forms part of this Policy.
39.	**"Serious Bodily Injury"** or **"Serious Sickness"**	In the context of the Insured Person or his/her Travel Companion, it means a Bodily Injury or Sickness that requires medical treatment and is certified by a Medical Practitioner as unfit to travel or continue the Journey, and results in Hospital confinement. In the context of the Close Business Partner or any person other than the Insured Person or his/her Travel Companion, Serious Bodily Injury or Serious Sickness shall refer to a Bodily Injury or Sickness that requires medical treatment and is certified by a Medical Practitioner as life-threatening, and

results in Hospital confinement, which leads to the discontinuation or cancellation of the Insured Person's original scheduled Journey.

40. "Sickness" means unforeseen illness or disease which is the direct and independent cause of loss for which the claim is made and which requires the attendance of a Medical Practitioner.

41. "Spouse" means the legally married spouse of an individual, regardless of gender, with the marriage being recognised under the laws of the jurisdiction where it was registered.

42. "Travel Companion" means the person who made the travel booking or reservation together with the Insured Person and accompanied the Insured Person for the entire Journey, other than the tour guide or any other tour member.

43. "Winter Sports" means recreational or amateur participation in skiing, tobogganing, sledding, ice skating, ice hockey and other sports specifically undertaken on snow or ice.

PART II – BENEFITS (per Insured Person)

All benefits payable under this Policy are subject to the maximum benefits payable as stated in the respective sections of the Insurance Certificate/Limit of Indemnity Table in accordance with the selected plan levels as stated in the Schedule/Insurance Certificate, as well as the terms, conditions and exclusions of this Policy.

BASIC BENEFITS (Sections 1 – 9)

Section 1 – Personal Accident

In the event of a Bodily Injury sustained by an Insured Person during the Period of Insurance which results in death or disablement, the Company shall pay this benefit in accordance with the followings:

Events	Percentage of the maximum benefit payable
1. Accidental death	100%
2. Permanent Total Disablement	100%
3. Major Burns	100%
4. Loss of Sight of Both Eyes; or Loss of Both Limbs; or Loss of Sight of One Eye and Loss of One Limb	100%
5. Loss of Sight of One Eye; or Loss of One Limb	50%
6. Loss of Speech; or Loss of Hearing	50%

Provisions for Section 1

The benefit payable under this Section is subject to the following conditions:

1. No benefits will be payable unless any one of the above events occurs within twelve (12) months from the date of Bodily Injury.
2. The amount payable for Major Burns is calculated in accordance with the percentage of the total body surface area burnt.
3. The maximum amount of all benefits payable for one or more Bodily Injuries sustained by each

Insured Person during the Period of Insurance shall not exceed 100% of the maximum benefits payable under this Section as stated in the Insurance Certificate/Limit of Indemnity Table.

Exclusions for Section 1

The Company shall not be liable for claims that are a consequence of any kind of Sickness, Pre-existing Condition, bacterial or viral infections even if contracted by Accident, unless the bacterial infection is a direct result of a cut or wound sustained from an Accident.

Section 2 – Compassionate Death Cash Benefit

In the event of death of the Insured Person during the Period of Insurance as a result of Bodily Injury or Sickness, the Company shall immediately pay a cash benefit to the Insured Person's beneficiary, or the Insured Person's legal estate in the absence of a designated beneficiary, provided that proof of loss is obtained from at least two (2) senior personnel of travel agent/organisation involved or through the Emergency Service Provider or media broadcasts. In the absence of such proof, this benefit will only be payable after the Company's receipt of the police report or death report.

Section 3 – Medical and Relevant Expenses

The Company shall pay this benefit for each sick or injured Insured Person in respect of:

3.1 Medical Treatment Expenses medically necessarily and reasonably incurred outside Hong Kong and within six (6) months of the date of incident giving rise to the claim as a direct result of a Bodily Injury or Sickness contracted or sustained during the Journey and the Period of Insurance.

3.2 The Medical Treatment Expenses (including the cost of a private ambulance, Chinese Medicine Practitioner and bone-setting fees) medically necessarily and reasonably incurred by the Insured Person in Hong Kong within thirty-one (31) days after the Insured Person's return to Hong Kong. Such expenses should be resulted from a Bodily Injury or Sickness contracted or sustained outside Hong Kong during the Period of Insurance.

3.3 Reasonable charges in the event of death for :

(1) burial of the Insured Person in the locality of death;

(2) transportation of body of the Insured Person to Hong Kong; or

(3) cremation of the Insured Person and transportation of ashes to Hong Kong.

No benefit will be payable under this item if the benefit under Part II item 9.4 "Repatriation of Mortal Remains/Ashes" of Section 9 – 24-hour Emergency Assistance Services and Benefits is payable for the same event.

In no event shall the total amount payable under item 3.1 to 3.3 exceed 100% of the maximum benefits payable under item 3.1 under this Section as stated in the Insurance Certificate/Limit of Indemnity Table of this Policy for each Insured Person.

Exclusions for Section 3

The Company shall not be liable for:

1. treatment or aid obtained in Hong Kong except as specifically covered in item 3.2;

2. surgery or medical treatments which in the opinion of the Insured Person's attending Medical Practitioner can be reasonably delayed until the Insured Person returns to Hong Kong;
3. cost of single or private room accommodation at a Hospital, and related clinical or nursing care expenses, except in the opinion of the Medical Practitioner, it is deemed medically necessary for the Insured Person for such accommodation;
4. dental care or treatment, except as necessitated by Bodily Injury to sound natural teeth sustained during the Period of Insurance;
5. claims not supported by official receipts, medical certificates and diagnosis reports, showing the nature of the Bodily Injury or Sickness, issued by the attending Medical Practitioner;
6. cosmetic surgery, refractive errors of eyes or hearing-aids, and prescriptions thereof, except as necessitated by Bodily Injury sustained during the insured Journey; or
7. treatment relating to Pre-existing Condition.

Section 4 - Baggage and Personal Effects

The Company will pay up to the maximum benefits payable under this Section as stated in the Insurance Certificate/Limit of Indemnity Table of this Policy for each Insured Person as a result of loss of or damage to baggage taken, sent in advance or purchased on the Journey (including sports equipment, clothing and personal effects worn or carried on the Insured Person, or stored in trunks, suitcases and the like receptacles), which are owned by the Insured Person, due to theft, robbery or accident occurring during the Period of Insurance.

Extended cover

For any loss of or damage to Insured Person's Personal Notebook Computer (notwithstanding exclusion 5 of this Section) due to theft or robbery, the Company shall reimburse the Insured Person up to the maximum benefits payable under this subsection.

The Company may make payment or at the option to reinstate or repair as the Company may elect, subject to due allowance for wear and tear and depreciation. In the event that the Insured Person purchases a comparable replacement for the damaged or lost article, the Company will pay the replacement cost provided that the damaged or lost article is not more than two (2) years old at the date of damage or loss. If the Insured Person cannot prove the age of the damaged or lost article or the article is more than two (2) years old, the Company will deal with the claim on the basis of intrinsic value of the article, or the cost of repair, whichever is the lower. If any article is proven beyond economical repair, the Company will deal with the claim as if the article had been lost.

For articles that are part of a pair or set, the Company will cover the actual value of the individual part or parts that have been lost or damaged, disregarding any special value they may possess as part of the entire pair or set.

If two (2) or more articles are insured under a single item or a set for the purpose of determining the Company's maximum liability per article, the damages to be paid in respect of that item or set shall be

deemed to have been apportioned equally between the said articles.

The Company shall at its discretion define the set of items in determining the application of the maximum benefit limit as specified in the Insurance Certificate/Limit of Indemnity Table.

Exclusions for Section 4

The Company shall not be liable for:

1. loss or damage arising from delay, confiscation, quarantine or detention by government authority, customs, police or other officials;
2. loss of or damage to foodstuff, beverages, medicines, tobacco products, stamps, contact or corneal lenses, dentures or orthodontic appliances, fragile articles, antiques, paintings or other works of art;
3. loss of or damage to cash, banknotes, negotiable instruments, bonds or securities, deeds, plastic money (including credit cards, stored value cards, Octopus cards and etc.), cryptocurrencies and other instruments of payment or documents of any kind, travel documents, travel tickets, or transportation and accommodation or any other travel vouchers or coupons;
4. loss or damage to any pager, mobile phone, Personal Notebook Computer, desktop computer, or their software or accessories;
5. loss of or damage to business goods or samples, data recorded on tapes, cards, discs or otherwise;
6. normal wear and tear, gradual deterioration, scratching, denting, mechanical or electrical breakdown or derangement;
7. loss or damage whilst in the custody of an airline or other carrier, unless such loss or damage is reported within twenty-four (24) hours of discovery, and in the case of an airline, a "Property Irregularity Report" is obtained,
8. loss which is not reported to the local police within 24 hours of discovery and a police report is not obtained;
9. loss of or damage to properties resulting from the Insured Person leaving them unattended in a Public Place, in an unlocked vehicle or in an unattended vehicle with no one inside, or as a result of the Insured Person's failure to take due care and precautions for the safeguard and security of such properties;
10. damage to sports equipment during use;
11. any unexplained loss or mysterious disappearance;
12. any loss arising from fraud or deception; or
13. any loss which has been paid by virtue of Section 5.

Section 5 – Personal Document and Travel Ticket

In the event the Insured Person suffers from loss of the Insured Person's travel document, ID card and/or travel ticket as a direct result of theft, robbery or accident during the Journey, the Company will reimburse each Insured Person up to the maximum benefits payable under this Section as stated in the Insurance Certificate/Limit of Indemnity Table of this Policy for:

5.1 the replacement cost of travel document, ID card and/or travel ticket charged by the issuing body;

and/or

5.2 additional transportation and accommodation expenses reasonably incurred to obtain a replacement of travel documents, ID card and/or travel ticket during the Journey. Such expenses are confined to travel to the issuing office nearest to the point where the loss was first discovered by the Insured Person.

Exclusions for Section 5

The Company shall not be liable for:

1. loss arising from delay, confiscation, quarantine or detention by government authority, customs, police or other officials;
2. loss which is not reported to the local police within twenty-four (24) hours of discovery and a police report is not obtained;
3. loss whilst in the custody of an airline or other carrier, unless such loss is reported within twenty-four (24) hours of discovery, and in the case of an airline, a "Property Irregularity Report" is obtained,
4. loss of travel document, ID card or travel tickets resulting from the Insured Person leaving them unattended in a Public Place, in an unlocked vehicle or in an unattended vehicle with no one inside, or as a result of the Insured Person's failure to take due care and precautions for the safeguard and security of such items;
5. loss of travel document, ID card or travel tickets not necessary for completing the Journey;
6. any unexplained loss or mysterious disappearance;
7. any fine or penalties due to non-replacement or late replacement of the travel document, ID card or travel tickets; or
8. loss of any credit cards and membership cards.

Section 6 - Personal Liability

The Company shall indemnify the Insured Person for legal liability to a third party arising from the Insured Person's negligence during the Period of Insurance as a result of:

6.1 Bodily Injury (including results in death or disease) to the third party; and/or

6.2 accidental loss of or damage to the third party's property.

In addition, the Company shall indemnify the Insured Person for:

(1) legal costs and expenses recoverable by any claimant from the Insured Person; and

(2) the legal costs and expenses incurred by the Insured Person with the prior written consent of the Company.

The maximum benefit amount payable by the Company applies to all claimants collectively in any one Period of Insurance, for all claims arising from any number of occurrences with a single original cause.

The Insured Person must not make any offer or promise of payment or admit liability to any other party, or become involved in any litigation without the Company's prior written approval.

In the event of any occurrence which may give rise to a claim under this Policy, the Insured Person shall

immediately give notice thereof to the Company with full particulars. Every letter, claim, writ, summons and process shall be notified or forwarded to the Company immediately on receipt by the Insured Person. Notice shall also be given in writing to the Company immediately when the Insured Person or any person claiming to be indemnified shall have knowledge of any impending prosecution, inquest or fatal inquiry in respect of any occurrence which may give rise to a claim under this Policy. In case of theft or other criminal act which may be the subject of a claim under this Policy, the Insured Person shall give immediate notice to the police and shall cooperate with the Company in securing the conviction of the offender.

No admission, offer, promise of payment or indemnity shall be made or given by or on behalf of the Insured Person or any person claiming to be indemnified without the prior written consent of the Company, which shall be entitled to take over and conduct in the name of the Insured Person or such person the defence or settlement of any claim or to prosecute in the name of the Insured Person or such person for the Company's own benefit, any claim for indemnity or damages or otherwise, and the Company shall have full discretion in the conduct of any proceedings and in the settlement of any claim and the Insured Person, and such person shall give all such information and assistance as the Company may require.

If, at the time any claim arises under this Policy, there is any other insurance covering the same loss, damage or liability, the Company shall not be liable to pay or contribute more than its rateable proportion of any loss, damage, compensation, costs or expenses.

Exclusions for Section 6

The Company shall not be liable for any claims arising directly or indirectly from, in respect of or due to:

1. employer's liability, contractual liability or liability to a member of the Insured Person's family;
2. property belonging to, held in trust by, or in the care, custody or control of the Insured Person;
3. any wilful, malicious, criminal or unlawful act;
4. pursuit of trade, business or profession;
5. ownership or occupation of land or buildings (other than occupation of any temporary residence),
6. ownership, possession or use of firearm, weapon, vehicles (whether motorised, mechanically-propelled or towed), airborne craft (whether manned or unmanned) or watercraft;
7. legal costs resulting from any criminal proceedings;
8. the influence of intoxicating liquor, drugs, or any other intoxicating or hallucinogenic substance;
9. transmission of communicable disease or virus by the Insured Person;
10. any loss, damage or expenses which are covered or should have been covered under any other insurance, or compensation scheme or fund;
11. liabilities assumed by the Insured Person under a contract that would not exist in the absence of such a contract;
12. any relief or recovery other than monetary amounts;
13. mountaineering, Winter Sports, water sports, ski racing in major events, ski-jumping, ice hockey, the use of bobsleighs or skeletons, riding or driving in races or rallies; or

14. liability arising from animals.

Section 7 - Travel Delay

In the event of departure of the Public Conveyance in which the Insured Person had pre-booked and arranged to travel is delayed from the departure time specified in the Insured Person's original itinerary due to the hi-jack, adverse weather conditions, natural disasters, Act of Terrorism, winding-up of travel agent (notwithstanding exclusion 6 of this Section), closure of airport, mechanical breakdown or structural defect of that Public Conveyance during the Period of Insurance (the "**Covered Delay**"), the Company will pay up to the maximum benefits payable under this Section as stated in the Insurance Certificate/Limit of Indemnity Table of this Policy to each Insured Person on one of 7.1-7.3, plus 7.4:

7.1 cash allowance for each of full 3 consecutive hours delay of High-speed rail or any other China Railway High-speed rail train;

7.2 cash allowance for each of full 6 consecutive hours delay of other Public Conveyance;

7.3 additional costs including alternative public transportation costs and accommodation expenses necessarily and reasonably incurred outside Hong Kong as a direct result of a Covered Delay by at least 6 consecutive hours;

7.4 Pet Boarding or Hotel Services

The company will reimburse the Insured Person, who has been suffering from involuntary travel delay in returning Hong Kong for more than 1 day (24 consecutive hours), for reasonable and unavoidable additional cost for extending the stay of his/her Pet boarded at a Pet Hotel/Boarding Establishment. The reimbursement will be payable from the second day of the travel delay up to a maximum of 3 days.

If the Insured Person has consecutive connected Public Conveyance, each period of delayed hours cannot be accumulated and the proximate cause of the delay must be due to the above-mentioned reasons.

Exclusions for Section 7

The Company shall not be liable for:

1. failure of the Insured Person to check in with the Public Conveyance (or their handling agents) or arrive at the departure gate at or before the recommended time specified by the Public Conveyance provider, tour operator or port authority;
2. the cause or condition leading to or resulting in the delay exists, is known to exist or is announced prior to the date of application for this insurance;
3. late arrival of the Insured Person at the airport, port or station after check-in or booking-in (except for the late arrival due to causes as stated under Section 7 "Travel Delay");
4. any delay arising from the Insured Person's refusal or failure to take the first available alternative transportation offered by the relevant Public Conveyance provider;
5. claims not supported by report or certificate from the Public Conveyance describing the nature and the duration of delay;
6. claims arising from fraudulent or deceptive practices of the Public Conveyance provider or their agents, travel agents or tour group operators, or their failure to arrange or provide services for which

the Insured Person has paid for;

7. costs that are recoverable by the Insured Person from any other source of indemnity or reimbursement, regardless of whether the Insured Person has actually pursued or accepted recoveries from such sources; or
8. any claim for which the insured person fails to furnish an official receipt issued by the Pet Hotel/Boarding Establishment which states the check-in and check-out dates of the Pet.

Section 8 – Cancellation

The Company will pay up to the maximum benefits payable under this Section as stated in the Insurance Certificate/Limit of Indemnity Table of this Policy to each Insured Person for the loss of irrecoverable deposits or charges paid in advance or contracted to be paid including travel ticket, accommodation expenses, tour package fees or admission tickets for major sports events, musicals, concerts, museums and theme parks for the sole benefit of the Insured Person, in the event of necessary and unavoidable cancellation of the booked Journey if any of the following event occurs after this Policy has been effective:

8.1 death, Serious Bodily Injury or Serious Sickness or like event occurring to the Insured Person or his Spouse, parent, parent-in-law, grandparent, Child, brother, sister, fiancé, fiancée, or Close Business Partner who ordinarily resides in Hong Kong;

8.2 compliance with a witness summons, jury service or Compulsory Quarantine of the Insured Person;

8.3 winding-up of travel agents which are registered in the Travel Industry Authority of Hong Kong;

8.4 serious damage to the Insured Person's principal home in Hong Kong due to fire or flood within 7 days before the commencement date of the planned insured Journey.

Provisions for Section 8

The benefit payable under this Section is subject to the following conditions:

1. With respect to any event stated in item 8.1 of this Section, the benefit will only be payable if the relevant event occurs after twenty-four (24) hours from the successful enrolment (except for the death, Serious Bodily Injury or Serious Sickness which is directly caused by an Accident).
2. With respect to any event stated in item 8.2 of this Section, the benefit will only be payable if an order or notice of compliance is issued to the Insured Person after twenty-four (24) hours from the successful enrolment.
3. The Insured Person shall provide and surrender all original unused tickets to the Company.
4. Once the Insured Person has departed Hong Kong to commence a Journey, the benefit under this Section will no longer be applicable for the same Journey.

Exclusions for Section 8

The Company shall not be liable for:

1. government regulation or act, delay or amendment of the booked itinerary, or failure in provision of any part of the booked Journey (including error, omission or default) by the provider of any service forming part of the booked Journey, or by the agent or tour operator through whom the Journey was booked;
2. disinclination to travel due to personal decision or financial circumstances of any Insured Person,

3. any unlawful act or criminal proceedings of any person on whom the Journey plans depend, other than attendance of the Insured Person under subpoena as a witness at a Court of Law;
4. failure to notify travel agent/tour operator or provider of transport or accommodation immediately when it is found necessary to cancel the travel arrangements;
5. the cause or condition leading to or resulting in the cancellation of Journey exists or is known to exist before commencement of the Journey or the date of application for this insurance;
6. any loss in relation to adverse weather warning announced by public authority in regions or countries of the trip departure and destination, which exists or is known to exist prior to the date of application for this insurance;
7. loss that is covered by any other existing insurance scheme, government program or loss which will be paid or refunded by a hotel, Public Conveyance provider, travel agent or any other provider of travel and/or accommodation;
8. any loss in relation to cancellations or curtailments to schedules that is not verified by the airline, travel agency or other relevant organisations;
9. failure to obtain a written medical report from the Medical Practitioner;
10. any penalty or cancellation fee charged for obtaining a refund for the cancellation of travel tickets, accommodation or admission tickets; or
11. any travel ticket, accommodation or admission tickets bought with non-monetary value, such as frequent flyer points, air miles or loyalty scheme points.

Section 9 – 24-hour Emergency Assistance Services and Benefits　Hotline：（852） 2861 9235

If the Insured Person shall suffer serious Bodily Injury or Sickness or is in need of medical, legal or administrative emergency assistance outside Hong Kong while arising out of and in the course of his/her Journey, provided that such Journey is not undertaken

- against the advice of a Medical Practitioner; and/or
- for the purpose of obtaining or seeking any medical or surgical treatment abroad;

the following emergency assistance services and benefits are available directly from the Emergency Service Provider upon specific verbal notification by the Insured Person or his/her personal representative, provided that the Insured Person shall not be entitled to the reimbursement of any such expenses incurred or paid directly by him.

9.1 Medical Attention, Telephone Medical Advice, Evaluation and Referral Appointment

When medical advice is needed, the Insured Person may contact the Emergency Service Provider hotline for medical advice and evaluation from the attending Medical Practitioner. However, it shall be stressed that telephone conversation cannot establish a diagnosis and shall be considered as an advice only. If medically necessary, the Insured Person shall be referred to another Medical Practitioner or to a medical specialist for personal assessment and the Emergency Service Provider will assist the Insured Person in making the medical appointment. All Medical Practitioner's fees and related charges shall be borne entirely and directly by the Insured Person without any reimbursement from the Emergency Service Provider.

9.2 Medical Evacuation

Should the Insured Person suffer from Bodily Injury or Sickness outside Hong Kong such that the

Emergency Service Provider's medical team and the attending Medical Practitioner recommends hospitalisation at another medical facility where the Insured Person can be suitably treated, the Emergency Service Provider will arrange and pay for:

(1) the transfer of the Insured Person to one of the nearest Hospitals and,

(2) if necessary on medical grounds, the transfer of the Insured Person with necessary medical supervision by any means (including but not limited to air ambulance, scheduled commercial flight, and road ambulance) to a Hospital more appropriately equipped for the particular Bodily Injury or Sickness.

The Emergency Service Provider's medical team and the attending Medical Practitioner will determine the necessary arrangements according to the circumstances.

To complete the medical evacuation, the Emergency Service Provider will in accordance with the condition arrange for the following:

(1) ambulance to transfer the Insured Person to the airport of departure

(2) emigration/immigration and customs clearances at the airport of departure/destination

(3) intensive care equipment

(4) qualified medical escort (e.g. anaesthesiologist, cardiologist, general practitioner, nurse) to stabilise the Insured Person and monitor his/her condition during the transport

(5) ambulance on the tarmac to meet the Insured Person and the medical escort at the airport of arrival

(6) immediate consultation by an appropriate specialist upon arrival

(7) reservation of bed in Hospital

(8) constant monitoring of the medical condition of the Insured Person during his/her hospitalisation by the Emergency Service Provider's doctor

(9) liaison with the family of the Insured Person and updating of the evolution of the treatment

9.3 Repatriation after Treatment

After local treatment, if (i) the Insured Person's medical condition in accordance with the medical opinion of both the attending Medical Practitioner and Emergency Service Provider's doctor will not prevent his/her medically supervised repatriation and (ii) his/her original ticket is not valid for the purpose, the Emergency Service Provider will arrange and pay for the repatriation of the Insured Person to Hong Kong by scheduled airline flight or any other appropriate means of transportation, including any supplementary cost of transportation to and from the airport, provided that (i) the Insured Person shall surrender any unused portion of his/her original travel ticket to the Emergency Service Provider, (ii) the fare class of the arranged Public Conveyance shall not exceed the fare class of the original travel ticket of the Insured Person, and (iii) any decision on the repatriation of the Insured Person shall be made jointly and exclusively by the attending Medical Practitioner, the Company and the Emergency Service Provider under constant medical supervision.

9.4 Repatriation of Mortal Remains/Ashes

Upon the death of an Insured Person, the Emergency Service Provider will make all the necessary arrangements (including any steps or arrangements necessary to meet local formalities) and will pay for:

(1) the repatriation of the Insured Person's body or ashes to Hong Kong, or

(2) at the request of the Insured Person's heirs or representative, the local burial of the Insured Person, provided that the Emergency Service Provider's financial responsibility for such local burial shall be limited to the equivalent of the cost of repatriation of the Insured Person's body or ashes to Hong Kong. In any event, the cost of coffin is not covered.

Notwithstanding anything to the contrary,

(a) in respect of the Insured Person Aged eighty (80) or below, the benefits payable under items 9.2, 9.3 and 9.4 shall be on actual expense basis; and

(b) in respect of the Insured Person Aged above eighty (80), the total amount of benefit payable under items 9.2, 9.3 and 9.4, and items 3.1 to 3.3 of Part II Section 3 – Medical and Relevant Expenses shall not exceed 100% of the maximum benefit amount of item 3.1 of Part II Section 3 – Medical and Relevant Expenses as specified in the Insurance Certificate/Limit of Indemnity Table.

9.5 Travel Information

The Insured Person may contact the Emergency Service Provider to obtain the travel related information services before starting or during his/her Journey.

9.6 Luggage Retrieval

In the event of loss or misrouting of the Insured Person's luggage by a common carrier, the Emergency Service Provider will liaise with the relevant entities, such as airline companies and customs officials, to ascertain the whereabouts of the luggage. However, the Emergency Service Provider and the Company shall not bear any responsibility for returning the recovered luggage to the Insured Person, which instead should be the sole responsibility of the common carrier.

9.7 Emergency Rerouting Arrangements

The Emergency Service Provider will assist the Insured Person in reorganising his/her flight schedule should an emergency oblige him to alter his/her original plan.

9.8 Administration Assistance on Loss of Travelling Document

In case of loss or theft of essential travel documents or personal identification documents (e.g. passport, entry visa, etc.), the Emergency Service Provider will provide the Insured Person with the necessary information regarding the formalities to be fulfilled with the appropriate local authorities or entities, in order to obtain the replacement of such lost or stolen documents.

9.9 Legal Assistance

Worldwide referral of lawyers and solicitors firms at the Insured Person's request.

9.10 Compassionate Visit

In the event of the Insured Person suffering from Serious Bodily Injury or Serious Sickness resulting in hospital confinement outside Hong Kong for more than ten (10) consecutive days, the Emergency Service Provider will arrange and pay for the cost of a return scheduled airline (on economy class fare basis) for a relative or designated person of the Insured Person to travel from Hong Kong to the Insured Person's location, including the cost of a standard room accommodation in any reasonable hotel, up to HK$1,200 per day and for a maximum period of five (5) consecutive days, but excluding the cost of drinks, meals and other room services.

9.11 Return of Unattended Dependent Child to Hong Kong

If (i) any of the Insured Person's travelling dependent Child under eighteen (18) years of Age is left

unattended by reason of the Insured Person's Serious Bodily Injury or Serious Sickness resulting in hospital confinement outside Hong Kong or the death of Insured Person and (ii) his/her original ticket is not valid for returning to Hong Kong, the Emergency Service Provider will organise and pay for the cost of a scheduled airline ticket for such Child to return to his/her home in Hong Kong, including any supplementary cost of transportation to and from the airport, provided that (i) any unused portion of the Child's original travel ticket shall be surrendered to the Emergency Service Provider, and (ii) the fare class of the arranged Public Conveyance shall not exceed the fare class of the original travel ticket of such Child. If necessary, the Emergency Service Provider will also hire and pay for a qualified attendant to accompany any such dependent Child for the return Journey.

9.12 Deposit Guaranteeing of Hospital Admission

In case of Hospital admission duly approved by both the attending Medical Practitioner and the Emergency Service Provider's doctor and the Insured Person is without means of payment of the required hospital admission deposit, the Emergency Service Provider will, on behalf of the Company, guarantee or provide such payment up to HK$50,000, subject to the terms, condition, limits and exclusions as specified in Part II Section 3 – Medical and Relevant Expenses.

9.13 Hotel Room Accommodation for Convalescence

The Emergency Service Provider will arrange and pay for the cost of a standard room accommodation in any reasonable hotel, up to HK$1,200 per day and for a maximum period of five (5) consecutive days, which is incurred by the Insured Person for the sole purpose of convalescence immediately following his/her discharge from the Hospital, and if deemed medically necessary by the Emergency Service Provider's doctor.

9.14 Unexpected Return to Hong Kong

In the event of the death of the Insured Person's immediate relative (which shall mean parents, Spouse, Child or siblings) in Hong Kong while the Insured Person is travelling outside Hong Kong (excluding the case of immigration), necessitating an unexpected return to Hong Kong, the Emergency Service Provider will arrange and pay for the cost of a scheduled one-way airline ticket (on economy class fare basis) for the Insured Person's return to Hong Kong.

9.15 Exclusions

The Company shall not be liable for:

(1) costs which would have been payable by the Insured Person if the event giving rise to the intervention of Emergency Service Provider had not occurred;

(2) cases of minor Sickness or Bodily Injury that, in the opinion of the Emergency Service Provider's doctor, can be adequately treated locally and do not prevent the Insured Person from continuing their travels or work. In such cases, the Emergency Service Provider will not provide any service to the Insured Person; or

(3) expenses incurred by the Insured Person if, in the opinion of the Emergency Service Provider's doctor, he/she is physically able to return to Hong Kong sitting as a normal passenger and without the need for a medical escort, unless deemed necessary by the Emergency Service Provider's doctor.

PART III - GENERAL EXCLUSIONS

1. Unless specifically provided otherwise, this Policy does not cover claims:

(1) for any sickness, disease, infirmity, physical defect or condition, which existed prior to the application for this insurance;

(2) arising from Pre-existing Conditions;

(3) where the loss, costs or expenses are recoverable from a government program, travel agent, airline, cruise company, Public Conveyance providers, any providers of travel accommodation and transport arrangements or other insurance policies (regardless of whether such other insurance is stated to be primary, contributory, excess, contingent or otherwise) or any other source, the Insured Person shall first make a claim against such other party and/or insurance and submit to the Company the proof of such claim, which shall be conditions precedent to any liability of the Company under this Policy to pay any remaining balance of the claim that is not recoverable from such other source and/or insurance (not applicable to Part II Section 1 – Personal Accident);

(4) directly or indirectly occasioned happening through or in consequence of :

(a) war (whether declared or not), invasion, acts of foreign enemies, hostilities, civil war, rebellion, revolution, insurrection, military or usurped power, 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, or riot or civil commotion (except as defined under Part II - Section 3 – Medical and Relevant Expenses);

(b) engaging in a professional capacity in any sport;

(c) accidents whilst engaged in racing (other than on foot), motor rallies or competitions;

(d) engaging in activities deemed illicit or illegal in the geographical location visited by the Insured Person;

(e) suicide, attempted suicide, intentional self-inflicted injury or sickness, insanity, psychosis, sleep disturbance order, mental or nervous disorder, 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 Medical Practitioner, but not for the treatment of drug addiction), self-exposure to needless peril (except in an attempt to save human life);

(f) nuclear fission, nuclear fusion or radioactive contamination; or

(g) kidnap, ransom or any Act of Terrorism (except as otherwise specified under this Policy);

(5) in respect of any property more specifically insured or any claim which but for the existence of this insurance would be recoverable under any other insurance;

(6) for incidents which may give rise to a claim not notified direct in writing to the Company within thirty (30) days after the expiry of the Journey;

(7) if the Insured Person is travelling contrary to the advice of a Medical Practitioner or for the purpose of obtaining medical treatment;

(8) for venereal disease or sexually transmissible diseases including AIDS (Acquired Immune Deficiency Syndrome) and ARC (AIDS Related Complex);

(9) for pregnancy, dystocia, miscarriage, abortion, assigned complications or childbirth;

(10) if the Insured Person is over one hundred (100) years of Age before the commencement of the

Journey;

(11) if the Insured Person is travelling for the purpose of migration or studying (except the Insured Person who is travelling for the purpose of short-term study trip and who is covered under "Student Short-term Study Trip Cover");

(12) for delays or failures in providing assistance caused by any strike, war, invasion, act of foreign enemies, armed hostilities, (regardless of a formal declaration of war), civil war, rebellion, insurrection, Act of Terrorism (except as otherwise specified under this Policy), political coup, riot or civil, commotion, administrative or political impediments or radioactivity or any other event of force majeure, which prevents the Emergency Service Provider from providing such assistance service and benefits;

(13) for business travel involving any dangerous assignments, projects or occupation of a manual nature; or engaging in duty for the following occupations: being as a crew member or an operator of any air carrier; any kind of labour work and manual worker; performing as an actor/actress/artist; site worker, fisherman, cook or kitchen worker, tour guide or tour escort; naval, military or air force service or operations or armed force services;

(14) arising by engaging in Winter Sports (only applicable to the Insured Person at the time of Bodily Injury or Sickness is Aged over seventy (70)) ;

(15) arising by engaging in Dangerous Activities (only applicable to the Insured Person at the time of Bodily Injury or Sickness is Aged under eighteen (18) or over seventy (70)) ; or

(16) trekking at an altitude greater than five thousand (5,000) meters above sea level or diving at a depth greater than forty (40) meters below the water surface.

2. Terrorism

Notwithstanding any provision to the contrary within this insurance or any endorsement thereto, it is agreed that this insurance excludes loss, damage, liability, cost or expense of whatsoever nature directly or indirectly caused by, resulting from or in connection with any Act of Terrorism regardless of any other cause or event contributing concurrently or in any other sequence to the loss (except as otherwise specified under this Policy).

This insurance also excludes loss, damage, liability, cost or expense of whatsoever nature directly or indirectly caused by, resulting from or in connection with any action taken in controlling, preventing, suppressing or in any way relating to any Act of Terrorism (except as otherwise specified under this Policy).

If the Company alleges that by reason of this exclusion, any loss, damage, liability, cost or expense is not covered by this insurance the burden of proving the contrary shall be upon the Policyholder.

In the event any portion of this exclusion is found to be invalid or unenforceable, the remainder shall remain in full force and effect.

3. IT Clarification Clause

Property damage covered under this Policy shall mean physical damage to the substance of property.

Physical damage to the substance of property shall not include damage to data or software, in particular any detrimental change in data, software or computer programs that is caused by a deletion, a corruption or a deformation of the original structure.

Consequently, the following are excluded from this Policy:

(1) Loss of or damage to data or software, in particular any detrimental change in data, software or computer programs that is caused by a deletion, a corruption or a deformation of the original structure, and any business interruption losses resulting from such loss or damage. Notwithstanding this exclusion, loss of or damage to data or software, which is the direct consequence of insured physical damage to the substance of property, shall be covered.

(2) Loss or damage resulting from an impairment in the function, availability, range of use or accessibility of data, software or computer programs, and any business interruption losses resulting from such loss or damage.

4. Sanctions Limitation and Exclusion Clause (LMA 3100)

No (re)insurer shall be deemed to provide cover and no (re)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 (re)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.

PART IV – ENDORSEMENT

STUDENT SHORT-TERM STUDY TRIP COVER

This Policy is extended to cover the Insured Person who is travelling for the purpose of short-term study trip and provided that the Insured Person must be a dependent unmarried student and Aged twenty-three (23) years old or below during the Period of Insurance. The entire journey of short-term study trip for students Aged seventeen (17) years old or below has to be accompanied by and with the custody care of an Adult.

FAMILY COVER

If Family is insured under this Policy, the maximum benefit payable by the Company in respective to each covered Section shall not exceed 200% in aggregate of the amount specified in the Insurance Certificate/Limit of Indemnity Table. (Not applicable to Section 1 “Personal Accident”, Section 2 “Compassionate Death Cash Benefit” and Section 9 “24-hour Emergency Assistance Service”)

AUTOMATIC EXTENSION FOR UNAVOIDABLE DELAY

The cover provided by this Policy will be automatically extended for a maximum period of seven (7) days in the event that the Insured Person is unavoidably delayed during the Journey in the course of his/her scheduled itinerary as stipulated prior to departure incapacitating him/her from returning to Hong Kong within the Period of Insurance due to an unexpected reason or condition, solely and independently of any other cause, and entirely beyond the Insured Person’s control. The extension will be terminated at the expiry of the maximum automatic extension period or on the date when such unavoidable cause of delay to

the Insured Person ceases to exist, whichever is earlier.

PART V – PREMIUM

1. This Policy shall become effective after the Policyholder has paid the premium.
2. Once the cover is in effect, no refund of premium is allowed.
3. Premium shall be paid in accordance with the amount stated in the Schedule/Insurance Certificate, endorsement and any memoranda and shall be paid on the commencement date of this Policy.
4. The Company reserves the right to adjust premium, maximum benefits payable as stated in the Limit of Indemnity Table and/or the Terms of "Greater Bay Area Travel Insurance Plan" for all the plans insured in this Policy. The rates or premiums and any rates of premium discounts or surcharges shall be prescribed from time to time by the Company.

PART VI – DUPLICATE APPLICATION

1. Duplicate Application

The Insured Person shall not be covered under more than one (1) insurance policy issued by the Company providing travel insurance cover for the same event of loss. In the event that the Insured Person is covered under more than one (1) insurance policy under the Company, the Company will consider that person to be insured under the policy that provides the greatest amount of benefit. Where the benefit under each such policy is identical, the Company will consider that person to be insured under the policy first issued. The Company will refund any duplicated insurance premium payment that may have been made by or on behalf of that person and the duplicated policy shall be void in respect of such particular Insured Person.

PART VII - GENERAL CONDITIONS

1. Interpretation

The Terms of this Policy, the Schedule, Insurance Certificate, Limit of Indemnity Table, memoranda and endorsements hereto shall be read together and any word or expression to which a specific meaning has been attached in any part of the Terms of this Policy, Schedule, Insurance Certificate, Limit of Indemnity Table, memoranda or endorsements hereto shall bear such meaning wherever it may appear. Should there be any discrepancy between the Chinese and English versions, the English version shall prevail.

2. Reasonable Care

The Policyholder or Insured Person must exercise reasonable care to prevent accidents, injury, sickness, loss or damage.

3. Validity of Policy

If the application of this Policy is made after the Insured Person has departed Hong Kong for commencing a Journey, this Policy shall then be void and no claim shall be payable under the Policy.

4. 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.

5. Claims Notification

(1) Any occurrence of loss, which may give rise to a claim, should be advised in writing

immediately to the Company. The Policyholder or Insured Person shall not be entitled to admit liability on behalf of the Company or to give any representations or other undertakings binding upon them except with the Company's written consent.

(2) If medical attention is received for Bodily Injury or Sickness, the Policyholder or Insured Person should pay and obtain an official receipt issued by a Medical Practitioner together with a medical certificate showing the nature of the Bodily Injury or Sickness.

(3) For any loss or damage to baggage etc. whilst in the custody of carriers (airline, bus company, etc.), notification must be given immediately in writing to such carriers and a report should be obtained.

(4) Any loss of property must be reported to the local police at the place of loss within twenty-four (24) hours of discovery and a police report must be obtained.

(5) In no event should a claim be notified later than thirty (30) days after the expiry of the Journey. The Policyholder or Insured Person should render his/her full co-operation during the course of investigation or assessment of the claim.

(6) Within thirty (30) days upon receipt of claim form provided by the Company, written proof of loss must be furnished to the Company. Failure to furnish such proof within the time required shall not invalidate any claims if it was not reasonably practicable to give proof within such time limit, provided that such proof is furnished as soon as reasonably practicable, and in no event later than one hundred and eighty (180) days from the time which such proof is otherwise required. All certificates, information, evidence required by the Company shall be furnished at the expense of the Insured Person, or claimant, or his/her legal personal representatives and shall be in such form and of such nature as the Company may prescribe.

6. Payment of Claims

(1) The Policyholder or the Insured Person may designate a beneficiary at the time of concluding this contract of insurance. In case of absence of such designation, the benefits shall be paid to the estate of the Insured Person. The beneficiary for disability or benefits provided, other than Part II Section 1 – Personal Accident, is the Policyholder or Insured Person himself and any designation shall not be accepted.

(2) Upon the payment of a claim to the Policyholder or Insured Person under this Policy, any unpaid premium may be deducted from such claim payment.

(3) Premium and benefits payable under this Policy shall be denominated in Hong Kong dollars and the benefits payable shall be calculated based on the exchange rate prevailing at the date of loss.

(4) The receipt of the Policyholder or Insured Person or his/her designated beneficiary or estate for any compensation payable under this Policy shall in all cases be full and effectual discharge of all liabilities of the Company.

7. Company's Right After Claim

The Company shall be entitled to conduct in the name and on behalf of the Policyholder or Insured Person the defence or settlement of any legal action and take proceedings at its own expenses and for its own benefit but in the name of the Policyholder or Insured Person to recover compensation from any third party in respect of anything covered by this Policy. In the event of the death of the Insured Person, the Company shall have the right to have a post mortem at its own expenses.

8. Other Insurance Policy

If at the time of any happening giving rise to any loss, damage, expenses or liability for which indemnity is provided under this Policy (except Part II Section 1 – Personal Accident) there shall be any other insurance against such loss, damage, expense or liability or any part thereof the Company shall not be liable for more than its rateable proportion thereof.

9. Interest

No benefit and expenses payable under this Policy shall carry interest.

10. 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.

11. Entire Contract and Changes

This Policy, including the Schedule, Insurance Certificate, Limit of Indemnity Table, endorsements, any memoranda, appendix and amendments (if any), will constitute the entire contract between the parties. Any change in this Policy is not valid unless evidenced by the Company's endorsement or amendment. The Company reserves the right to underwrite, amend the terms and/or adjust the premium and maximum limit for coverage under this Policy.

12. Arbitration

All difference arising out of this Policy shall be determined by arbitration in accordance with the Arbitration Ordinance as amended from time to time. If the parties fail to agree upon the choice of the arbitrators, then the choice shall be referred to the Chairman of Hong Kong International Arbitration Centre. It is expressly stipulated that it shall be a condition precedent to any right of action or suit upon this Policy that an arbitration award shall be first obtained. If the Company shall disclaim liability to the Policyholder, Insured Person or Family for any claim hereunder and such claim shall not within twelve (12) calendar months from the date of such disclaimer have been referred to arbitration under the provisions herein contained then the claim shall for all purposes be deemed to have been abandoned and shall not hereafter be recoverable hereunder.

13. Prohibition on Trust or Assignment

This Policy is not assignable and the Policyholder or Insured Person warrants that this Policy is not subject to a trust and will not be made subject to a lien or charge and that this Policy will be kept in the Policyholder's or Insured Person's possession throughout the effective period of this Policy.

14. Proper Law and Jurisdiction

This Policy shall be subject to the jurisdiction of Hong Kong and shall in all respects be governed by and construed in accordance with the laws of Hong Kong and the Courts of Hong Kong shall have sole and exclusive jurisdiction in relation to any dispute, claim or legal proceedings arising from anything or matter in connection with this Policy.

15. Errors and Omissions

Clerical errors in keeping the records shall not invalidate coverage otherwise validly in force nor continue coverage otherwise validly terminated. If the Age or date of birth of the Insured Person(s), or other relevant facts relating to the insured Journey or to the Insured Person(s) or Family shall be found to have been inadvertently misstated, and if such misstatement affects the premium, scale of benefits or has anything to do with the coverage or any provisions or Terms under this Policy, the true Age and

facts shall be used in determining the actual premium, and whether benefits are secured under the Terms of this Policy, and if so, in what amount, and an adjustment of premium shall be made by the Company in its absolute discretion in the event it considers benefits are payable under this Policy. The Company has the right to deduct any premium shortfall from any benefit payable by the Company under this Policy.

16. Emergency Assistance Notification

(1) In a life threatening situation, the Insured Person or his/her representative should always try to arrange for emergency transfer to a hospital near the place of occurrence through the most appropriate and immediate means and then contact the Emergency Service Provider to provide the appropriate information as soon as possible.

(2) In the event of Bodily Injury or Sickness resulting in the hospitalisation of the Insured Person prior to notifying the Emergency Service Provider, the Insured Person or his representative, where possible, shall contact the Emergency Service Provider within three (3) days of the occurrence of such emergency or any complication directly relating to such emergency. In the absence of such notice, the Emergency Service Provider shall not be held liable under this Policy.

17. Repatriation Assistance

In the event of repatriation, in order to facilitate prompt response, the Insured Person or his/her representative shall provide:

(1) the name, address and telephone number of the hospital or other medical facility where the Insured Person has been taken; and

(2) the name, address and phone number of the attending Medical Practitioner, and if necessary, the Insured Person's family doctor.

18. Emergency Assistance Service

(1) The Emergency Service Provider's medical team or other representatives shall have free access to the Insured Person in order to assess the Insured Person's condition. Without reasonable justification for denial of such an access, the Insured Person will not be eligible for further medical assistance.

(2) On a case per case basis, the medical team will decide whether repatriation is appropriate and will choose the date and means of such repatriation.

(3) In the event of repatriation of the Insured Person by the Emergency Service Provider, the Insured Person shall deliver the unused portion of his/her ticket, or the value thereof, to the Emergency Service Provider to offset the cost of such repatriation.

(4) The Insured Person or any party will not be entitled to the reimbursement of any expenses without obtaining a prior approval from the Emergency Service Provider.

(5) The Insured Person shall be obliged to use reasonable efforts to mitigate the effects of an emergency.

(6) The Insured Person shall cooperate with the Emergency Service Provider to enable the Emergency Service Provider to get all documents and receipts from the relevant sources and assist the Emergency Service Provider at his/her expenses in complying with necessary formalities.

(7) The Insured Person and his/her representative shall give all necessary information and assistance as the Company/Emergency Service Provider may reasonably require from time to time for

investigating and verifying the claim. In the event that the emergency service is so required before confirmation of policy liability, the Company may at its own discretion provide such service on without prejudice basis so far as the Insured Person or his/her representative shall sign an undertaking (with necessary personal particulars) to reimburse the fee for the emergency service used in full or any shortfall incurred.

(8) Any claim with respect to an assistance event or the right to any legal action or claim shall be forfeited unless such claim is filed within two (2) years of the occurrence of such event.

Personal Information Collection Statement

The information you provide to Bank of China Group Insurance Company Limited ("the Company") is collected to enable the Company to carry on insurance business and may be used for the purpose of:

(1) processing and evaluating your insurance application and any future insurance application you may make;
(2) administering your insurance policy and providing services in relation to your insurance policy;
(3) analysis or investigating, processing and paying claims made under your insurance policy;
(4) invoicing and collecting premiums and outstanding amounts from you;
(5) any alterations, variations, cancellation or renewal of any insurance related product or service;
(6) contacting you for any of the above purposes;
(7) exercising any right of subrogation by the Company ;
(8) other ancillary purposes which are directly related to the above purposes; and
(9) complying with applicable laws, regulations or any industry codes or guidelines.

The Company may disclose your personal data for the above purposes to the following classes of transferees (whether within or outside the Hong Kong Special Administrative Region) :

(a) third party agents, contractors and advisors who provide administrative, communications, computer, payment, security or other services which assist us to carry out the above purposes (including medical service providers, emergency assistance service providers, telemarketers, mailing houses, IT service providers and data processors);
(b) in the event of a claim, loss adjudicators, claims investigators and medical advisors;
(c) in the event of default, debt collectors and recovery agents;
(d) insurance reference bureaus or credit reference bureaus;
(e) reinsurers and reinsurance brokers;
(f) your insurance broker (if you have one);
(g) the Company’s legal and professional advisors;
(h) the Company’s related companies (as that term is defined in the Companies Ordinance);
(i) any association, federation or similar organization of insurance companies ("Federation") and its members that exists or is formed from time to time for any of the above or related purposes or to enable the Federation to carry out its regulatory functions or such other functions that may be assigned to the Federation from time to time and are reasonably required in the interest of the insurance industry or any member(s) of the Federation;

(j) any member(s) of the "Federation" by the "Federation" for any of the above or related purposes;
(k) any related company or any other company carrying on insurance or reinsurance related business or an intermediary or a claims or investigation or other service provider providing services relevant to insurance business for any of the above or related purposes;
(l) any industry or regulatory bodies responsible for handling insurance related complaints and/or disputes; and
(m) government agencies and authorities as required or permitted by law.

The Company is hereby authorized to obtain access to and/or to verify any of your data with the information collected by the Federation from the insurance industry.

Moreover, the Company may also use and disclose your personal data otherwise with your consent.

You have the right to obtain access to and to request correction of any personal information concerning yourself held by the Company. Requests for such access can be made to the Company's Legal and Compliance Department (Tel: 2867 0888 / Fax: 3906 9939).

Use of Personal Data in Direct Marketing

With your written consent given for direct marketing purpose (which includes an indication of no objection), the Company intends to use your data in direct marketing. The Company will only act in accordance with the rules about direct marketing contained in the Ordinance. Please note that:

(1) your name, contact details, products and services portfolio information and demographic data held by the Company may be used by the Company in direct marketing from time to time;
(2) the following classes of services, products and subjects may be marketed:
    (i) financial, insurance and related services and products;
    (ii) reward, loyalty or privileges programmes and related services and products;
    (iii) services and products offered by the Company's co-branding partners (the names of such co-branding partners can be found in the application form(s) for the relevant services and products, as the case may be); and
    (iv) donations and contributions for charitable and/or non-profit making purposes;
(3) the above services, products and subjects may be provided to or (in the case of donations and contributions) contributed to by the Company and/or:
    (i) the Company or BOC Hong Kong (Holdings) Limited or any of its subsidiaries;
    (ii) third party reward, loyalty, co-branding or privileges programme providers;
    (iii) co-branding partners of the Company and BOC Hong Kong (Holdings) Limited (the names of such co-branding partners can be found on the application form(s) for the relevant services and products, as the case may be); and
    (iv) charitable or non-profit making organisations;
(4) in addition to marketing the above services, products and subjects itself, the Company also intends to provide the data described in paragraph (1) above to all or any of the persons described in paragraph (3) above for use by them in marketing those services, products and subjects, and the Company

requires your written consent (which includes an indication of no objection) for that purpose.

If you do not wish the Company to use or provide to other persons your data for use in direct marketing as described above, you shall exercise your opt-out right by notifying the Legal and Compliance Department of the Company (Tel.:2867 0888, Fax no.:3906 9939).

Limit of Indemnity Table

BASIC BENEFITS (Sections 1 – 9)

Insured Sections and Coverage	Maximum Benefits Payable[1] (each Insured Person) (HK$)	
	Elite Plan	**Standard Plan**
1. Personal Accident - For Insured Person Aged under 18 or over 70	500,000 250,000	150,000 75,000
2. Compassionate Death Cash Benefit (In the event of death caused by Sickness, the maximum benefit payable shall be 30% of the specified amount)	20,000	10,000
3. Medical and Relevant Expenses		
3.1 Medical Treatment Expenses - For Insured Person Aged under 18 or over 70	300,000 150,000	100,000 50,000
3.2 Follow-up Medical Treatment Expenses in Hong Kong - Sub-limit for Chinese medicine treatment and bone-setting	20,000 1,500 (150 per day)	5,000 1,500 (150 per day)
3.3 Repatriation of Mortal Remains	50,000	N/A
4. Baggage and Personal Effects **Extended Cover** Personal Notebook Computer, maximum for any one article/pair/set	3,000 (1,000 per article/pair/set) 1,000	1,000 (300 per article/pair/set) N/A
5. Personal Document and Travel Ticket - Sub-limit for accommodation expenses	2,000 500 per day	N/A
6. Personal Liability	500,000	N/A
7. Travel Delay		
7.1 Cash Allowance for delay of High-speed rail or any other China Railway High-speed rail train - each 3 hours of delay	900 300	300 300
7.2 Cash Allowance for delay of other Public Conveyance - each 6 hours of delay	900 300	300 300
7.3 Additional Travelling and Accommodation Expenses	1,200	600
7.4 Pet Boarding Services	200 per day (Max. 3 days)	N/A
8. Cancellation	5,000	2,500
9. 24-hour Emergency Assistance Services and Benefits		
Deposit Guaranteeing of Hospital Admission	50,000	
Medical Evacuation	Actual Expenses*	
Repatriation after Treatment	Actual Expenses*	
Repatriation of Mortal Remains/Ashes	Actual Expenses*	
Referral Services	Referral services for legal assistance, interpreter and replacement of lost travel document or travel pass	
	* Note: For Insured Person Aged above 80, the aggregate maximum limit of the Medical Evacuation, Repatriation after Treatment and Repatriation of Mortal Remains/Ashes will be adjusted to the amount listed below, and will be shared with the maximum limit of Section 3 – Medical and Relevant Expenses.	
	150,000	50,000

Notes:

1. Payable on a “per journey basis”

中銀集團保險有限公司
BANK OF CHINA GROUP INSURANCE COMPANY LIMITED

香港中環德輔道中 71 號永安集團大廈 9 樓

客戶服務熱線：3187 5100　　傳真：3906 9919

注意事項:

客戶投保前必須留意並參閱中銀集團保險網站**「最新消息」**以瞭解中銀集團保險就旅遊事故之最新消息及保障安排。

大灣區旅遊保障計劃保單

保單持有人以一份投保書及聲明謹向中銀集團保險有限公司（下稱“本公司”）申請下述保險。該份投保書及聲明已被納入本合約內，並成為本合約之基礎。保單持有人已繳付保費，作為本保險的代價。

茲證明本保單或批單上所列之承保條件、除外條款、基本條款、責任限額（當中全被當作納入本保單之條款內）為依歸下，本公司同意賠償給受保人任何或所有以下所列在承保期內及每次旅程期間所發生之承保事項（在本保單另有列明則除外）。

惟在任何情況下，保單持有人或受保人或其任何代表完全遵守及履行保單所載條件，是為本公司根據本保單承擔任何賠償責任的先決條件。

就本保單而言，如內容許可，只表達單數的字詞亦可包括眾數，反之亦然；只表達男性的字詞亦可包括女性 (保單持有人的字詞除外)，反之亦然。

第一部份　定義

以下任何字詞及字句應用於保單、承保表/保險證、批單及任何備忘錄均具有該意義。

1. 「意外」　意指完全超出當事人所能控制的範圍下，不可預見且非故意的事件。此事件由暴力、外在且可見的力量造成，並導致身體受傷或身故。

2. 「恐怖主義活動」　意指任何人士或團體，不論單獨行事或代表或與任何組織或政府

		一併行事，所採取的一項行動，包括但不限於使用武力或暴力，及/或以威嚇手段，以達到政治、宗教、意識形態或類似目的，包括意圖影響任何政府，及/或令公衆人士或任何部份公衆人士感到惶恐。
3.	「成人」	意指年齡十八(18) 歲至一百(100) 歲之人士。
4.	「年齡」	意指受保人於承保期起始日時的上一次生日時的年歲。如在此情況下受保人少於一(1)歲，則以受保人於承保期起始日時的實際年齡(以星期計)作準。
5.	「身體受傷」或「傷患」	意指直接因意外而非任何其他事故下所蒙受之身體損傷，而並非由疾病、病症或逐步出現的生理或精神失調所形成。
6.	「子女」	意指保單持有人或成人受保人的受供養及未婚的合法子女，包括繼子女和合法領養的子女。就受保於本保單之子女而言，其年齡必須由六(6)星期至十七(17)歲，並與保單持有人或成人受保人同住，且在整個旅程中： (1) 與成人受保人一起同行 (該成人受保人必須為其父母）；或 (2) 在成人照顧下一起同行（適用於獨立投保本保單的孩童及/或該孩童旅程之目的為短期遊學）。
7.	「中醫」	意指一位根據《中醫藥條例》(香港法例第 549 章) 於香港中醫藥管理委員會妥善註冊成為中醫的人士，惟在任何情況下不包括受保人、保單持有人、保險中介人、或保單持有人及 / 或受保人的僱主、僱員、直系家屬或業務夥伴。
8.	「緊密業務夥伴」	意指受保人的業務中擁有其股份的業務夥伴。
9.	「強制隔離」	意指受保人被強制入住醫院內之隔離病房或政府指定之隔離地點最少連續二十四（24）小時，並須連續逗留於該隔離地點直至獲解除隔離為止。
10.	「危險活動」	意指乘坐熱氣球、直升機、小型飛機或飛機或在其上觀光（惟以付費乘客身份乘搭由正式持牌機組人員操作並獲正式授權的航空運輸活動中經認證用於客運的多引擎載客飛機則不在此限）、吊索跳崖、懸掛滑翔、跳降落傘、激流、快艇、水上電單車、在不超過海拔五千(5,000)米進行徒步旅行、登山(需要使用繩索或在嚮導帶領下登山)、攀石、水肺潛水、使用呼吸儀器裝備的水底活動及任何其他由本公司定為危險程度相近的活動。
11.	「緊急服務供應商」	意指由本公司按第二部分第 9 章 - 24 小時緊急支援服務及保障

指定為受保人提供緊急援助及支援服務的第三方機構或實體。

12. 「家庭」　意指名字載於承保表/保險證或隨後附加於本保單的批單內成人受保人的直系家屬，包括其本人，其配偶及子女。

13. 「粵港澳大灣區」　意指香港、澳門、廣州、深圳、珠海、佛山、中山、東莞、肇慶、惠州及江門。

14. 「香港」　意指中華人民共和國香港特別行政區。

15. 「醫院」　意指按其所在地的法律妥善成立及註冊為醫院的機構，並須：

(1) 主要以住院病人形式接待、護理及治療患病、不適或受傷的人士為目的運作；
(2) 只接受在醫生直接監督下始能接納住院病人入院，並至少有一名醫生隨時可提供諮詢；
(3) 設有可為有關人士提供系統化的設施以進行醫療診斷及治療，並在醫院範圍內或醫院可控制或使用的設備下提供進行大型手術的設施（如適用）；
(4) 在護理人員的監督下提供全日護理服務；及
(5) 維持一名合法持牌的駐院醫生。

就此定義而言，醫院並不包括：

(1) 精神護理機構、主要為治療精神疾病包括智力障礙的機構、醫院精神科；
(2) 老人院、療養院、戒毒或戒酒治療所；及
(3) 水療中心或自然療養院、護理或療養院、醫院特為戒毒或戒酒而設的部門、或作為護理、療養、復康、長期護理的設施或靜養所。

16. 「直系家屬」　意指某人士的配偶、父母、祖父母 / 外祖父母、子女、兄弟姐妹、孫 / 外孫、合法監護人、配偶之父母或祖父母 / 外祖父母。

17. 「保險證」　意指附於本保單的保險證，並為本保單的一部份。

18. 「受保人」　意指

(1) 於承保表/保險證或隨後附加於本保單的批單內列為「受保人」的成人、其配偶或家庭或子女；或
(2) 如保單持有人為商業實體或公司，於承保表/保險證或隨後附加於本保單的批單內所列的成人僱員。

19. 「旅程」　意指在承保期內離開香港前往粵港澳大灣區旅遊。該旅程由受保人離開其香港的住所或辦公室(以較後者為準) 並以直接路線前往香港出境櫃台起計，直至受保人以直接路線由香港入境櫃台返

		抵其在香港的住所或辦公室(以較早者為準)終止。「旅程」的最長期限不得超逾 31 天。
20.	「賠償限額表」	意指本公司於本保單之受保章節內須承擔之最高金額。
21.	「喪失一目視力」/「喪失雙目視力」	意指一 / 雙目完全及無法復原及不能醫治下喪失視力。
22.	「失聰」	意指完全、永久及無法復原地雙耳失去聽覺能力，並不可以手術或其他治療方法補救。
23.	「喪失一肢」/「喪失雙肢」	意指一 / 兩隻手掌或手腕以上部份，或一 / 兩隻足部或足踝以上部份從身體分離，或完全及永久失去其功能。
24.	「喪失語言能力」	意指完全、永久及無法復原地失去語言能力，並不可以手術或其他治療方法補救。
25.	「嚴重燒傷」	意指燒傷程度達第三級並且引致全部皮層被破壞，而燒傷佔身體總表面積最少 10%。
26.	「醫生」	意指一位(i)根據《醫生註冊條例》(香港法例第 161 章) 於香港醫務委員會妥善註冊或如涉及香港以外地區，於當地擁有同等地位的機構註冊，及(ii)在提供治療當地獲合法授權從事醫學的內 / 外科診療的人士，惟在任何情況下不包括受保人、保單持有人、保險中介人、或保單持有人或受保人的僱主、僱員、直系家屬或業務夥伴。
27.	「醫療費用」	意指受保人向醫生或醫院支付的實際費用，以接受內科、外科或護理治療，包括醫療物料費用、召喚救護車或專業家居護理服務的相關費用，但不包括牙科護理及治療費用，除非因意外受傷引致健全及天然的牙齒受損而接受的必要及緊急治療則除外。該等費用必須為接受經醫生建議的服務所引致，並不得超過該項服務合理慣例的收費。
28.	「承保期」	意指承保表/保險證內所列的受保日期起至旅程終止之日，但為旅程最長期限所限。而「第二部份第 8 章 - 取消旅程」則由投保日開始計算。
29.	「永久完全傷殘」	意指意外發生後十二(12)個月內持續完全傷殘，不可從事任何可賺取收入的工作，並完全不能進行一般日常生活活動及在該段期間屆滿時並無任何改善的希望。
30.	「個人手提電腦」	意指手提電腦、筆記型電腦、迷你筆記型電腦或平板電腦。

31.	「寵物」	意指受保人合法擁有並慣常居住於受保人於香港之主要居所的貓隻或狗隻，且並非用作商業、配種 / 繁殖或競賽用途。
32.	「寵物酒店/動物寄養所」	意指根據《公眾衛生（動物）（寄養所）規例》（香港法例第 139I 章）獲得牌照的設施。
33.	「保單」	指保單持有人、受保人與本公司之間的整份保單合約，包括保單條款、承保表 / 保險證、任何批單或備忘錄及由保單持有人或受保人或其核准的代表所提交的所有相關文件，包括申請表格、投保書、聲明及 / 或保險受益人委任表。
34.	「保單持有人」	意指擁有本保單並於承保表/保險證或隨後附加於本保單的批單內列為「保單持有人」的人士或商業實體。
35.	「已存在的病狀」	意指受保人在承保期開始前已存在的受傷、疾病、病症或醫療狀況，而受保人當時已知悉或應已知悉所出現病徵或徵狀。
36.	「公共交通工具」	意指任何由正式持牌運輸機構以定期運載購票乘客之用而提供和營運的巴士、長途巴士、計程車、渡輪、氣墊船、水翼船、輪船、火車、電車、高速鐵路或地下火車，以及任何由正式持牌航空或包機公司以定期運載購票乘客之用而提供和營運的飛機，以及任何定期行走固定路線和班次的機場接送車輛。
37.	「公眾地方」	意指任何一般公眾可進出的地點，包括公共交通工具。
38.	「承保表」	意指附於本保單的承保表，並為本保單的一部份。
39.	「嚴重身體受傷」或「嚴重疾病」	就受保人或其同行夥伴而言，意指需接受治療的身體受傷或疾病，並經醫生證實不適宜旅遊或繼續旅程，且引致住院。 就緊密業務夥伴、或任何受保人或其同行夥伴以外之人士而言，嚴重身體受傷或嚴重疾病意指需接受治療的身體受傷或疾病，並經醫生證明有生命危險，且引致住院，從而令受保人需要中斷或取消其原定旅程。
40.	「疾病」	意指不可預知的疾病，而該疾病必須直接及單獨地導致索償及須接受醫生的治療。
41.	「配偶」	意指與另一位人士擁有合法婚姻關係的人士（不限性別），且須受婚姻註冊當地的法律承認。
42.	「同行夥伴」	意指與受保人一同報名參加或預訂旅遊行程的人士，並於整個旅程一直與受保人同行，而非其導遊或任何其他旅行團團友。

43. 「冬季運動」　　意指屬休閒或業餘性質的滑雪、長橇運動、雪橇滑行、滑冰、冰上曲棍球與任何其他在雪地或冰上進行的運動。

第二部份　保障範圍 (每名受保人)

本保單內應支付的所有保障須根據承保表 / 保險證內所列之計劃級別受載列於保險證 / 賠償限額表內之最高賠償額，以及本保單的條款、條件及除外責任所限制。

基本保障(第 1 - 9 章)

第 1 章 – 人身意外

倘若受保人在承保期內因身體受傷而引致身故或傷殘，本公司將按照下表作出賠償：

事項	最高賠償額百分率
1. 意外身故	100%
2. 永久完全傷殘	100%
3. 嚴重燒傷	100%
4. 喪失雙目視力；或喪失雙肢；或喪失一目視力及喪失一肢	100%
5. 喪失一目視力；或喪失一肢	50%
6. 喪失語言能力；或失聰	50%

第 1 章條文

此章節的保障受限於以下規定：

1. 除非從身體受傷當日起計的十二(12)個月內出現上述任何一項事項，否則將不獲賠償。
2. 嚴重燒傷的賠償額是按照身體總表面積燒傷的百分率計算。
3. 如每名受保人在承保期內遭受一次或多次身體受傷，應支付之最高賠償額合共不得超過保險證/賠償限額表內就此章節所列的最高賠償額的 100%。

第 1 章除外責任

本公司無須對因任何疾病、已存在的病狀、意外導致細菌或病毒感染 (除非細菌感染是由意外造成的割傷或傷口直接導致) 而引起的索償負責。

第 2 章 – 身亡撫恤金

倘受保人在承保期內因身體受傷或疾病導致身亡，本公司將即時向受保人的受益人，或如無指定受益人，則向受保人的遺產支付現金保障，惟本公司須取得由屬於所涉及的旅行代理商 / 機構的最少兩(2)名高級人員提供、或經緊急服務供應商或公共傳播媒介獲得的損失證明。倘無上述證明，此

章節之賠償將在本公司收到警方報告或死亡報告後才作出支付。

第 3 章 – 醫療及有關費用

本公司將就每名患病或受傷的受保人支付以下之保障：

3.1. 受保人因在承保期內於旅程期間遭受身體受傷或患上疾病，並直接在該導致索償的事件發生當日起計六(6)個月內在香港以外地區因醫療所需而合理地招致的醫療費用。

3.2. 受保人返回香港起計三十一(31)天內因醫療所需而於香港合理地招致的醫療費用(包括私家救護車費用、中醫及跌打費用)。此等費用須為受保人於承保期內，在香港以外地區遭受身體受傷或患上疾病所引致。

3.3 因身故引致以下之合理費用：

（1） 受保人在身故當地殮葬；

（2） 運送受保人遺體返回香港；或

（3） 受保人遺體火化並將骨灰運返香港。

如因同一事件應獲支付第二部分第 9 章 –24 小時緊急支援服務及保障中之項目 9.4「運返遺體 / 骨灰回國」之保障，則此項目將不會就該事件作出賠償。

在任何情況下，就每名受保人而言，本公司就項目 3.1 至 3.3 應支付的總賠償額不得超過保險證 / 賠償限額表中就此章節之項目 3.1 所列之最高賠償額的 100%。

第 3 章除外責任

本公司無須對以下項目負責：

1. 在香港接受的治療或救援，除非在此章節的項目 3.2 內特別註明；
2. 如經受保人的主診醫生評估，認為該項手術或治療可合理地延遲至受保人返回香港後進行；
3. 醫院的單人或私家病房膳宿，及相關的診症或護理費用，除非醫生認為此等安排對受保人而言屬醫療所需；
4. 牙科護理或治療，除非在承保期內因身體受傷引致健全及天然的牙齒受損；
5. 未能提供由主診醫生發出列有該身體受傷或疾病之性質的正式收據、醫學證明書及診斷報告的索償；
6. 整容手術、眼睛屈光不正或助聽器，以及有關的處方，除非因於旅程中因身體受傷所引致； 或
7. 與已存在的病狀相關的治療。

第 4 章 – 個人行李及財物

本公司將賠償每名受保人在承保期內直接因遭盜竊、搶劫或意外而導致由受保人攜帶、預先送往目的地或在旅程上購買，並由其擁有的行李遺失或損毀 (包括運動設備、穿著在身上或放於行李箱、手提箱及類似的儲存品內的衣服或個人財物) ,惟以本保單保險證/賠償限額表內就此章所列的最高

賠償額為限。

延伸保障

本公司將賠償每名受保人的個人手提電腦(儘管此章節之除外責任第 5 項另有規定)被盜竊或搶劫而導致的遺失或損毀。

本公司有權根據物品的損耗及折舊程度賠償其重估價值或維修該物品。若受保人於該物品損毀或遺失後補購類似的替代品，而原有物品在損毀或遺失當日購入不超過兩（2）年，本公司將賠償補購費用。如受保人未能證明遺失或損毀之物品的購入日期或該物品已購入超過兩(2)年，本公司將按該物品的實際價值或維修費用處理有關索償，以較低者為準。如該物品超出經濟修復，本公司將以該物品被當作已遺失的情況作賠償。

當物品為一對或一套物件的其中一部分時，在不參考該物品作為該整對或整套物件的其中一部份可能具有特別價值的情況下，本公司將賠償遺失或損毀的單一個或多個部份的實際價值。

倘若兩（2）個或以上的物品是以在同一件或一組物件受保，為確定本公司對每項物品承擔之最高賠償額，則針對該件或該組物件支付的賠償額應被視為在有關物品之間平均攤分。

本公司有權自行決定將物品歸類一組物件，以決定保險證 / 賠償限額表內之最高賠償額之應用。

第 4 章除外責任

本公司無須對以下項目負責：

1. 因政府機構、海關、警方或其他官員延誤、充公、隔離或扣留而引致的遺失或損毀；
2. 食品、飲品、藥物、煙草產品、郵票、隱形眼鏡、假牙或牙齒矯正器、易碎物品、古董、畫作或其他藝術品的遺失或損毀；
3. 現金、鈔票、可轉讓票據、債券或證券、契約、代用貨幣(包括信用卡、儲值卡、八達通卡等)、加密貨幣及其他支付工具或任何類型的文件、旅遊證件、交通票據、或交通及住宿代用券或任何旅遊代用券的損失或損毀。
4. 傳呼機、流動電話、個人手提電腦、桌面電腦、或其軟件或附件的遺失或損毀；
5. 商業物品或樣本，儲存在錄影帶、儲存卡、鐳射光碟或類似物品的資料的遺失或損毀；
6. 正常損耗、逐漸變質、刮損、凹痕、機械或電力故障或失靈；
7. 在航空公司或其他運輸公司保管期間引致的遺失或損毀，除非在發現遺失或損毀的二十四(24) 小時內報失，且如在屬航空公司的情況下，取得「財物損失報告」；
8. 沒有在發現遺失後二十四(24)小時內通知當地警方及取得警方報告；
9. 受保人將財物在無人看管下放置在公眾地方、沒上鎖的車輛內或無人在車內看管的車輛內，或因受保人未有採取適當措施予以安全保管該些財物而引致的遺失或損毀；或
10. 運動設備在使用中損毀；

11. 任何無法解釋的遺失或離奇消失；
12. 任何因欺詐或行騙引致的損失；或
13. 任何根據保單第五章已作出賠償之損失。

第 5 章 – 個人證件及交通票據

如受保人於旅程期間直接因遭盜竊、搶劫或意外而遺失旅遊證件、身份證明文件及/或交通票據，本公司將賠償該受保人以下損失，惟以本保單保險證/賠償限額表內就此章所列的最高賠償額為限:

5.1 由簽發旅遊證件、身份證明文件及/或發行交通票據之機構所收取的補領費用；及/或

5.2 在旅程期間補領旅遊證件、身份證明文件及/或交通票據所引致的合理額外酒店住宿及交通費用，惟僅限於前往最近受保人首次發現其旅遊證件及交通票據之遺失的地方的簽發或發行機構作補領。

第5章除外責任

本公司無須對以下項目負責：

1. 因政府機構、海關、警方或其他官員延誤、充公、隔離或扣留而引致的遺失；
2. 沒有在發現遺失後的二十四(24)小時內通知當地警方及取得警方報告；
3. 在航空公司或其他運輸公司保管期間引致的損失，除非在發現遺失的二十四(24)小時內報失，且如在屬航空公司的情況下，取得「財物損失報告」;
4. 受保人將旅遊證件、身份證明文件或交通票據在無人看管下放置在公眾地方、沒上鎖的車輛內或無人在車內看管的車輛內，或因受保人未有採取適當措施予以安全保管該些物品而引致的遺失；
5. 遺失的旅遊證件、身份證明文件或交通票據並非為完成旅程所必須的；
6. 任何無法解釋的遺失或離奇消失；
7. 任何因未有或逾期補領旅遊證件、身份證明文件或交通票據所招致的罰款或罰金；或
8. 任何信用卡及會員證。

第 6 章 – 個人責任

如在承保期內受保人因疏忽導致：

6.1 第三者身體受傷 (包括所引致的身故或疾病)；及/或

6.2 第三者的財物意外遺失或損毀，

而須負上法律責任，本公司將就此向受保人作出賠償。

此外，本保障亦伸延至賠償：

(1) 任何索償人可向受保人追討的法律費用及開支；及

(2) 在獲得本公司書面同意下受保人所招致的法律費用及開支。

本公司應支付的最高賠償額將適用於任何一個承保期內所有的索償人，及於同一原因引致的任何事故的索償。

在未有本公司的書面批准下，受保人不得向任何其他一方作出任何付款提議或承諾，或承認過失，或牽涉任何訴訟。

受保人應就可能會導致本保單之索償的事件立即通知本公司並提供全部詳情。受保人必須在收取所有書信、索償、令狀、傳票及程序後立即通知及將其轉交予本公司。受保人或任何提出索償人士亦應在知悉任何由可能會導致本保單之索償的事件所引致的檢控、研訊或致命事故立即向本公司發出書面通知。如發生可能導致本保單之索償的盜竊或其他刑事行為，受保人應立即通知警方，並配合本公司以確保犯罪者被定罪。

未經本公司事先以書面同意前，受保人或任何提出索償人士或其代表不得作出任何責任承認、提議、承諾付款或賠償，而本公司有權接管並以受保人或該人士之名義進行任何索賠的辯護或和解、或為維護本公司自身利益以受保人或該人士之名義提出任何彌償、損害或其他事項的申索。本公司在處理任何訴訟程序及達成和解協議時擁有完全酌情權，而受保人及該等人士應按本公司要求向本公司提供所有資訊及協助。

如在任何時候本保單出現的任何索賠已由任何其他保險保障該損失、損害或責任，本公司將不負責承擔或賠償超出其按比率分攤的任何損失、損害、賠償、費用或開支。

第 6 章除外責任

本公司無須負責由以下事故直接或間接引致、與其有關或由此引起的索償：

1. 僱主責任、合約性責任或受保人對其家庭成員的責任；
2. 屬於受保人或由受保人受信託所管有，或由其看管、保管或控制的財物；
3. 任何故意、惡意、刑事或非法行為；
4. 從事貿易、商業或專業的活動；
5. 擁有或佔有土地或建築物 (佔用臨時居所除外)；
6. 擁有、保管或使用槍械、武器、車輛（不論是機動性、機械推動或牽引性的）、飛行器（不論有載人或無載人）或船隻；
7. 由任何刑事程序產生的法律費用；
8. 受保人被酒精、藥物或任何其他有毒或使人產生幻覺的物質影響；
9. 受保人傳播的傳染性疾病或病毒；
10. 已由或應由其他保險、補償計劃或賠償基金保障的損失、損毀或開支；
11. 受保人根據合約須承擔的責任（如未有該合約，該責任將不存在）；
12. 任何金錢價值以外的補償或追討；
13. 登山、冬季運動、水上運動、參加大型滑雪比賽、滑雪跳躍、冰上曲棍球、使用雪車或鋼架雪

車、賽車或越野賽車；或

14. 由動物引致的責任。

第 7 章 – 旅程延誤

在承保期內，倘若因公共交通工具被騎劫、惡劣天氣、天然災難、恐怖主義活動、旅行社清盤（儘管此章節之除外責任第6項另有規定）、機場關閉、公共交通工具出現機械性故障或結構性缺陷，致令受保人已預訂及安排乘搭的公共交通工具較受保人在旅程表上列明的啟程時間延遲超過指定持續時間，本公司將根據本保單保險證/賠償限額表內就此章所列的最高賠償額為限，向每名受保人作出7.1-7.3其中一項及7.4的賠償：

7.1 高速鐵路或動車每個完整及連續 3 小時延誤的現金賠償；

7.2 其他公共交通工具每個完整及連續 6 小時延誤的現金賠償；

7.3 因連續延誤最少 6 小時引致在香港以外地區轉乘其他公共交通工具及住宿的合理及無可避免的額外費用；

7.4 寵物照顧服務

保障受保人因上述原因非自願性延誤返港超過 1 天(連續 24 小時)，其寵物必須延長入住寵物酒店/動物寄養所而導致的合理及無可避免的實際額外費用。(由延長入住寵物酒店的第 2 日起計，最高賠償日數為 3 天)。

如受保人乘搭連續的接駁公共交通工具，每段延誤時間不可累積計算，而延誤的近因必須為上述事故所導致。

第 7 章除外責任

本公司無須對以下項目負責：

1. 受保人未能於公共交通工具機構、旅行團營運商或港務局建議的時間或之前向公共交通工具機構（或其代理）辦理登機手續或報到，或抵達啟程之閘口；
2. 引致延誤之原因或情況於保險申請日前已存在、已知其存在或已公佈;
3. 受保人在辦理登機或預訂手續後遲誤抵達機場、港口或車站。(除非因第 7 章「旅程延誤」保障內定明的原因所引致的延遲) ；
4. 因受保人拒絕或未有乘搭由有關公共交通工具機構所提供的最早可啟程的替代交通工具所引致的任何旅程延誤；
5. 未能提供載有延誤時間及原因的公共交通工具機構書面報告或證明的索償；
6. 因公共交通工具機構或其代理、旅行代理商或旅行團營運商欺詐或欺騙行為，或未能安排或提供受保人已付款的服務而引致的索償；
7. 受保人可從任何其他保障或賠償來源討回的費用，不論受保人是否實際上有向該來源追討及接受賠償；或
8. 未能提供寵物酒店/動物寄養所發出的正式收據，註明寵物的入住及退住日期而提出之索償。

第 8 章 – 取消旅程

本公司將根據本保單保險證/賠償限額表內就此章所列的最高賠償額為限，賠償每名受保人在保單生效後因下述事故而必須及無可避免地取消計劃旅程及損失已預繳或承諾支付而不可退回的交通票據、住宿、旅行團費或大型運動賽事、音樂劇、演唱會、博物館或主題公園的入場券門票費用：

1. 受保人或其配偶、父母、姻親父母、祖父母、子女、兄弟、姊妹、未婚夫、未婚妻或通常居住在香港的緊密業務夥伴因身故、嚴重身體受傷或嚴重疾病或相類事故；
2. 受保人需出庭作供、出任陪審員或接受強制隔離；
3. 香港旅遊業監管局的註冊旅行社清盤；
4. 於原定旅程出發日前 7 天內受保人於香港的主要居所發生火災或水災引致嚴重受損。

第 8 章條文

此章節的保障受限於以下規定：

1. 就上文所載列的8.1項引致取旅程消的直接原因，有關事項須於成功投保24小時後發生(因意外直接引致的身故、嚴重身體受傷或嚴重疾病則不受此限)。
2. 就上文所載列的8.2項引致取消旅程的直接原因，有關的命令、公告或通知須於成功投保24小時後向受保人頒布或發出。
3. 受保人須把未曾使用的所有原有票據交由本公司處置。
4. 當受保人為展開旅程已離開香港，此章節之保障將不再適用於同一旅程。

第 8 章除外責任

本公司無須對以下項目負責：

1. 政府規例或法令、已預訂旅程的延遲或修訂、或應提供已預訂的旅程的任何部分之機構、或其代理或旅行團營運商未能提供已預訂的任何一部份的旅程 (包括錯誤、遺漏或違約)；
2. 任何受保人因個人意願或財政狀況而不願成行；
3. 任何負責旅程計劃人士的非法行動或刑事程序，受保人應傳票在法庭作供則除外；
4. 發現必須取消旅程時，未有立即通知旅遊代理商/旅行團營運商、或提供交通或住宿的機構；
5. 引致取消旅程之原因或情況於旅程開展前或保險申請日前已存在或已知其存在;
6. 於行程出發地或目的地國家或地區所屬官方機構宣布之惡劣天氣警告引致之相關損失，而該事件於保險申請日前已存在或已知其存在；
7. 受保於任何其他保險或政府計劃的損失，或將會獲酒店、公共交通工具機構、旅行代理商或其他旅遊及/或住宿服務供應商賠償或退款的損失；
8. 任何未經航空公司、旅行代理商或其他有關機構證實的取消旅程的損失；
9. 未能提供醫生簽發之醫療報告；
10. 因取消交通票據、住宿或入場券門票而索取退款時被收取的罰金或取消手續費；或
11. 以非金錢價值（如飛行常客積分、飛行里數或會員計劃積分）購買的交通票據、住宿或入場券門票。

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若受保人在香港以外地區展開旅程時遭受嚴重身體受傷或患上嚴重疾病或需要醫療、法律或行政上的緊急援助，而該旅程並非

- 違反醫生的勸告；及/或
- 是為在海外接受或尋求醫學或手術治療，

受保人或其代表可直接以口頭形式通知緊急服務供應商，要求以下之緊急援助服務及保障，惟任何由受保人自行支付的有關費用將不會獲發還。

9.1 醫療建議、評估及轉介約見

當需要醫療建議時，受保人可致電緊急服務供應商的熱線電話以向當值醫生索取醫療建議及評估，惟該項電話諮詢只被視為建議性質，並不能視作對受保人之診斷。若醫療上有需要，受保人將被轉介至另一位醫生或專科醫生以獲取其個人評估，而緊急服務供應商亦將協助受保人進行預約，惟所有醫生費用及相關之收費需完全及直接由受保人支付，緊急服務供應商將不就此作任何賠償。

9.2 緊急護送

若受保人在香港以外地區身體受傷或患上疾病，而緊急服務供應商的醫療隊伍及受保人的主診醫生均建議將受保人轉送至其他醫療機構以接受所需之適當治療，緊急服務供應商將安排以下服務及支付相關費用：

(1) 運送受保人至其中一間最就近的醫院；及

(2) 如站在醫療的角度上有需要，通過任何方式(包括但不限於空中救護機，固定航班之商務客機及陸上救護車)將受保人在必要的醫療監護下轉送至一所在設備上就更適合治療該項傷患或疾病的醫院。

緊急服務供應商的醫療隊伍及受保人的主診醫生將根據實際情況共同決定所需的安排。

為完成醫療運送，緊急服務供應商會根據情況安排以下事項：

(1) 救護車運送受保人前往出發的機場

(2) 於出發/目的地的機場進行的離境/入境及清關手續

(3) 提供深切治療器材

(4) 合資格的醫療護送人員(如:麻醉科醫生、心臟科醫生、普通科醫生、護士)在護送過程中穩定及監察受保人的情況

(5) 救護車在受保人及醫療護送人員飛抵機場時於停機坪接應

(6) 合適專科醫生在受保人抵達後提供即時診症

(7) 預留醫院床位

(8) 緊急服務供應商的醫生於受保人住院時持續監察其病情

(9) 與受保人家屬聯絡並知會治療進展

9.3 治療後之護送服務

在當地治療後，如(i)根據受保人的主診醫生和緊急服務供應商的醫生的醫學意見共同認定受保人的病情不會阻礙他接受醫學監護下的護送，及(ii)受保人之原有交通票據不能用在此目的上，緊急服務供應商將安排以固定航班之客機或其他合適的運輸方法護送受保人返回香港，並會支付該護送服務的費用，包括任何往返機場的額外費用，惟(i)受保人須把原有交通票據之未使用部份交回緊急服務供應商；(ii)安排之公共交通工具的票價等級並不可高於受保人原有交通票據的票價等級；及 (iii)任何有關是否需要將受保人送返香港的決定必須由主診醫生、本公司及緊急服務供應商共同作出，並在持續的醫療監督下進行。

9.4 運返遺體/骨灰回國

如受保人不幸身故，緊急服務供應商就下列之事項作出所有所需安排(包括任何符合當地規定的步驟及安排)並支付相關費用：

(1) 將受保人遺體或骨灰運返香港；或

(2) 應受保人之繼承人或合法代表之要求，安排受保人在當地安葬，惟緊急服務供應商就當地安葬所承擔的費用將僅限於將受保人遺體或骨灰運返香港之等值費用。棺木費用於任何情況下都不受保障。

儘管有其他規定，

(a) 就年齡為八十（80）歲或以下之受保人而言，項目 9.2、9.3 及 9.4 將按實際費用基準作出賠償；及

(b) 就年齡為八十（80）歲以上之受保人而言，項目 9.2、9.3 及 9.4，以及第二部分第 3 章 – 醫療及有關費用之項目 3.1 至 3.3 應支付的總賠償額將不得超過根據保險證 / 賠償限額表內就第二部分第 3 章 – 醫療及有關費用之項目 3.1 所列的最高賠償額之 100%。

9.5 旅遊諮詢

受保人可在旅程前或旅程期間聯絡緊急服務供應商以獲取相關旅遊資訊服務

9.6 代尋行李

如運送機構遺失或誤送受保人的行李，緊急服務供應商將聯絡有關機構（如航空公司及海關人員）以查明該行李的下落。惟將已尋回的行李送回給受保人的責任應由該運送機構全權負責，緊急服務供應商及本公司將不就此承擔任何責任。

9.7 更改行程之緊急安排

若受保人遇緊急事故需更改原先行程，緊急服務供應商將協助受保人重新安排所乘坐之飛機班次。

9.8 旅遊證件補發支援

當受保人旅程所需之旅遊證件或個人證明文件(如護照、入境簽證等)遺失或被盜竊，緊急服務供應商將向受保人提供符合當地政府部門或機構規定的所需資料，以便受保人向有關當局或單位補辦證件。

9.9 法律轉介

應受保人要求，緊急服務供應商將提供全球律師及律師行的轉介服務。

9.10 親友探病

若受保人在香港以外地區因嚴重身體受傷或嚴重疾病入住醫院連續十(10)天以上，緊急服務供應商將安排受保人一名親屬或其指定人士，由香港乘搭固定航班之客機(以經濟客位票價為限)往返受保人所在地點探望受保人，並支付相關費用。該費用包括最長連續五(5)天，每天最高港幣 1,200 元的任何合理酒店的標準房間費用，但不包括飲料、膳食及其他額外房間服務費用。

9.11 護送隨行之未成年子女返回香港

若(i)受保人在於香港以外地區因嚴重身體受傷或嚴重疾病而住院或不幸去世，並因此遺下同行而年齡未滿十八(18)歲的受供養子女，而(ii)在該名子女返回香港之回程機票已失效的情況下，緊急服務供應商將安排該名子女乘坐固定航班之客機返回香港家中，並支付相關機票費用，包括任何往返機場的額外交通費用。惟(i)須把該名子女之原有公共交通工具票據的未使用部份交回緊急服務供應商及(ii)安排之公共交通工具的票價等級並不可高於該名子女原有交通票據的票價等級。如有需要，緊急服務供應商將聘請合資格人員陪同該名子女返回香港並支付相關費用。

9.12 住院按金保證

當主診醫生及緊急服務供應商均同意受保人須入住醫院時，緊急服務供應商可在受保人無法即時支付所需之住院按金的情況下，代表本公司提供最高港幣 50,000 元之住院按金保證，但須受限於第二部份第 3 章 - 醫療及有關費用的條款、條件、限額及除外責任。

9.13 出院後療養住宿

若緊急服務供應商之醫生認為受保人因醫療所需需要於出院後即時進行療養，緊急服務供應商將會僅為受保人進行療養為目的為受保人安排出院後在任何合理酒店的標準房間之住宿並支付相關費用，每天上限則為港幣 1,200 元，並最長連續五(5)天。

9.14 安排緊急回國料理親人後事

當受保人身處香港以外地區期間（不包括移民），其直系親屬（指父母、配偶、子女或兄弟姊妹）於香港身故，而令受保人須在不可預見的情況下須立即返回香港，緊急服務供應商將安排受保人乘坐固定航班之客機(以經濟客位票價為限)返回香港及支付有關的單程機票費用。

9.15 除外責任

本公司無須對以下項目負責：

(1) 在無緊急服務供應商介入的情況下，受保人理應支付早已產生的費用。

(2) 根據緊急服務供應商之醫生的意見，受保人的輕微疾病或傷患可在當地獲妥當的治療，而不會妨礙受保人繼續旅程或工作。在此情況下，緊急服務供應商將不會為該受保人提供任何支援服務。

(3) 如根據緊急服務供應商之醫生的意見認為受保人在體能上可在無醫療護送人員陪同下，仍能如正常乘客返回香港，除非緊急服務供應商之醫生認為有需要，否則本公司將不負責受

保人產生的費用。

第三部份　一般除外責任

1. 除本保單另有規定外，本保單不保障以下索償：

(1) 任何在申請本保單前已存在的疾病、病狀、病弱或生理上的缺陷或狀況；

(2) 由已存在的病狀引起的索償；

(3) 如受保人可就損失、費用、開支向政府計劃、旅行代理商、航空公司、郵輪公司、公共交通工具機構、任何安排旅遊住宿及交通之服務供應商或其他保險（不論該保險註明屬主要的，分擔性的，附加的，待確定的或其他）或其他來源申請索償，受保人應先向上述各方及／或保險公司索償，並向本公司遞交相關索償證明以作為本公司在本保單下就任何未能向上述各方及／或保險公司索償的餘下部分有任何賠償責任之先決條件（不適用第二部分第 1 章 – 人身意外）；

(4) 直接或間接由下列原因而招致的損失：

(a) 戰爭（不論已宣戰與否）、侵略、外敵行動、敵對行動、內戰、叛亂、革命、起義、軍事或奪權行動、充公或國有化或任何政府或公共或當地政府機構的行動或指令對財物的徵用、或造成破壞或損毀、或暴動或內亂(在第二部份第 3 章 -醫療及有關費用內註明則不在此限)；

(b) 以專業性質參與任何運動；

(c) 參與競賽(徒步除外)、越野賽車或比賽時發生的意外事故；

(d) 進行在受保人前往的地域範圍屬非法或違法的活動；

(e) 自殺、企圖自殺、蓄意自我傷害或疾病、精神錯亂、精神病、睡眠障礙症、精神或神經紊亂、酒精引致的反應或影響(不論暫時性與否)、服用藥物(經醫生處方的藥物除外，但不包括戒毒治療)，自行暴露於不必要的危險地（意圖拯救他人性命除外)；

(f) 核分裂、核聚變或輻射污染；

(g) 綁架、勒索或任何恐怖主義活動(在本保單另有列明則除外）。

(5) 有關任何已經另行特別投保的財物或任何在沒有本保單的情況下可向其他保險索回補償的財物；

(6) 未有在旅程完結後三十(30)天內直接以書面通知本公司可能會導致本保單之索償的事件；

(7) 如受保人違反醫生的勸告或以醫治疾病為目的之旅程；

(8) 性病、經性接觸傳染的疾病包括愛滋病(後天免疫力缺乏症)及愛滋病併發症；

(9) 懷孕、難產、流產、墮胎、懷孕併發症或分娩；

(10) 受保人在旅程開始前年齡超過 100 歲；

(11) 如受保人以移民或升學(受保人旅程之目的為短期遊學及受保於“學童短期遊學保障”則除外) 為目的之旅程；

(12) 因罷工、戰爭、侵略、外敵行動、武裝敵對行動（不論已正式宣戰與否）、內戰、叛亂、起義、恐怖主義活動(在本保單另有列明則除外)、政變、暴動或內亂、行政或政治干預、輻射或任何其他不可抗力事件令緊急服務供應商未能提供援助服務或保障，從而引致有關援助服務的延誤或失效；

(13) 涉及從事危險任務、項目計劃或體力勞動性質工作，或從事以下職業的之職責：作為任何航空運輸工具的成員或操作員、任何類型的體力勞動工作、以演員／藝人身份表演、地盤工人、漁夫、廚師或廚房工人、導遊或領隊、海軍、陸軍、空軍服務或行動或武裝部隊服務的商務旅程；

(14) 參與冬季運動(只適用於在身體受傷或患上疾病當日年齡為七十(70)歲以上的受保人)；

(15) 參與危險活動(只適用於在身體受傷或患上疾病當日年齡為十八(18)歲以下或七十(70)歲以上的受保人)；

(16) 在海拔五千(5,000)米以上進行高山遠足，或在水面以下超過四十（40）米深度潛水。

2. 恐怖主義

不論此保單內容及其任何批單當中含有任何相反條款，現特同意，此保障並不包括由恐怖主義活動直接或間接導致、引起，或與之有關的損失、損壞、責任、費用或支出(不論其性質如何)，不論是否同時受任何其他原因或事件影響，或與該項損失以任何次序接續發生(在本保單另有列明則除外)。

此保單亦排除為了控制、阻止、鎮壓恐怖主義活動或以任何方式與之有關而採取的行動所直接或間接導致、引起，或與之有關的損失、損壞、責任、費用或支出（不論其性質如何）(在本保單另有列明則除外)。

倘若本公司聲稱基於本除外責任，本保單不保障任何損失、損壞、責任、費用或支出，提出任何相反舉證的責任須由保單持有人承擔。

倘若此項的除外責任的任何部份被證實為無效或不可執行，其餘部份仍須保持完全有效性及可執行性。

3. 資訊科技澄清條款

此保單所保障的財產損壞指財產本體的實質損壞。

財產本體的實質損壞並不包括數據或軟件的損壞，尤其是由於原本結構遭刪除、破壞或變形，以致數據、軟件或電腦程式發生任何有損害性的改變。

因此，下列事項排除於此保單的保障範圍以外：

(1) 數據或軟件的損失或損毀，尤其是由於原本結構遭刪除、破壞或變形，以致數據、軟件或電腦程式發生任何有損害性的改變，及由於該等的損失或損毀而導致的任何商業停頓

損失。儘管此除外責任另有規定，因財產本體受保障的實質損壞，而直接導致的數據或軟件損失或損毀，將會受到保障。

(2) 由於數據、軟件或電腦程式的功能、可用性、使用範圍或可讀取性受損，而導致損失或損毀，以及因該等損失或損毀而導致的任何商業停頓損失。

4. 制裁限制及除外條款 (LMA3100)

保險人（再保險人）不得提供承保及支付任何賠款或提供任何利益給下述，依據聯合國決議有關制裁、禁令或限制之國家，或經歐盟、英國或美國所作貿易或經濟制裁、法律或規範之國家。

第四部份　批註

學童短期遊學保障

在承保期內，本保單延伸保障受保人以短期遊學為目的之旅程，惟該受保人須為年齡二十三(23)歲或以下、未婚及未有工作的學生，而年齡十七(17)歲或以下的人士在遊學期間必須在成人照顧及陪同下完成整個旅程。

家庭保障

如家庭是受保於本保單內，本公司在每一受保項目的個別合計最高賠償額不得超過保險證/賠償限額表內所列最高賠償額的 200%。 (不適用於第二部份第 1 章「人身意外」、第 2 章「身亡撫恤金」及第 9 章「24 小時全球緊急支援服務」)。

因不能避免的延誤所引致自動延長保險期

如受保人在按出發前的行程表已訂定的旅程期間，全因意料之外的原因或情況，且並無其他原因及完全在受保人控制範圍以外，出現無可避免的延誤，令其無法在承保期內返回香港，本保單的保險期限將自動延長最多七(7)天。本自動延長保險期會於該七(7)天自動延長保險期屆滿時或當該導致無可避免延誤的原因不復存在當日終止，以較早者為準。

第五部份 保費

1. 保單持有人在繳交保費後，本保單方可生效。
2. 保障一經生效，保費將不會獲退還。
3. 保費需按承保表/保險證、批單或任何備忘錄上所列繳付，保費亦需在保單起保日時繳款。
4. 本公司有權調整「大灣區旅遊保障計劃」中所有計劃的保費、賠償限額表內所列之最高賠償限額及 / 或保單條款。收費率或保費及任何保費折扣率或附加費將由本公司不時指定。

第六部份　重複投保

1. 重複投保

受保人不得受保於多於一(1)份由本公司就相同索償事故提供旅遊保險保障的保險保單。若受保人於本公司受保多於一(1)份保險保單，本公司將視受保人受其中最高保障額的保單所保障。如各保單的保障額相同，本公司將視受保人受最先發出之保單所保障。本公司將向該人士或其代表發還重複支付的保費，而重複投保的保單則會作廢。

第七部份　一般保單條文

1. 解釋

本保單之條款、承保表、保險證、賠償限額表、備忘錄及批單應一併閱讀，而本保單之條款、承保表、保險證、賠償限額表、備忘錄或批單的任何部份內之任何字詞或字句如帶有特定解釋，在任何情況下出現都視作帶有此種解釋。如中、英文版本有任何歧異，概以英文版本為準。

2. 合理保護

保單持有人或受保人必須合理謹慎以避免意外、受傷、疾病、損失或損毀事件的發生。

3. 保單有效性

如受保人在展開旅程並離開香港後才作出本保單之申請，本保單將會失效且將不會支付任何賠償。

4. 欺詐

如有任何欺騙或蓄意誇大的索償，或有任何虛假的聲明或陳述，本保單將會失效且將不會支付任何賠償。

5. 索償通知

(1) 如發生任何可能會導致本保單之索償的損失，必須儘快以書面通知本公司。除非獲得本公司書面同意，否則保單持有人或受保人不得自行以本公司的名義承擔責任，或作出任何對其有約束力的陳述或承諾。

(2) 如因身體受傷或疾病接受治療，保單持有人或受保人須先行支付有關費用及取得由醫生發出的正式收據及列有身體受傷或疾病性質的醫學證明。

(3) 就任何行李等財物在運輸工具(航空、巴士公司等) 保管期間的遺失或損毀，應立即以書面通知有關運輸工具及取得報告。

(4) 任何金錢或財物的遺失，必須於發現遺失後二十四(24)小時內通知當地警方及取得警方報告。

(5) 在任何情況下不可超過旅程完結後的三十(30)天才提出索償通知。保單持有人或受保人須於調查或評估索償的過程中提供充分合作。

(6) 所有損失證明文件需於本公司收到賠償申請表後三十（30）日內呈交給本公司。倘有合

理的緣由不能於限期內將有關證明文件送交本公司，但已盡可能於限期後立即送出，且不超過一百八十（180）日之限，則不會被視為放棄申請賠償的權利。本公司所需之證書、資料及證據，須依據本公司所定之形式及性質提交，所有費用需由受保人或索償人、或其合法代表負責，本公司概不會負責任何費用。

6. 支付賠償

(1) 保單持有人或受保人可於簽訂本保險合約時指定受益人。倘無指定受益人，賠償將支付予受保人的遺產。除了第二部份第 1 章「人身意外」，任何傷殘或保障利益的受益人須是保單持有人或受保人，恕不接受指定其他受益人。

(2) 在本保單內任何未繳交的保費將在支付予保單持有人或受保人的有關賠償金額中扣除。

(3) 在本保單內的保費及應付之賠償均以港幣計算，應付之賠償亦將根據損失當日之兌換率計算。

(4) 保單持有人或受保人或其指定受益人或遺產就收訖任何賠償後簽訂的收據，均被視為本公司完全履行所有法律責任。

7. 本公司於索償後的權利

本公司有權代表保單持有人或受保人並以彼等之名義，解決任何法律訴訟或提出抗辯。本公司亦可自費並為其本身利益，以保單持有人或受保人之名義就保單之任何賠償向任何第三者追討。若受保人身故，本公司有權支付費用進行驗屍。

8. 其他保險

任何遺失、損毀、費用及責任，如在提出索償時已獲其他保險單保障，本公司將不負責超出按比例賠償的部份。(第二部份第 1 章「人身意外」不在此限)

9. 利息

本保單支付的保障均不帶利息。

10. 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。

11. 完整合約及修改

本保單包括承保表、保險證、賠償限額表、批單、任何備忘錄、附錄與修訂（如有），將構成各方之間的完整合約。除經本公司批准，並得批單和修訂本為證，否則本保單的任何修改均屬無效。本公司將保留對所有本保單作核保、修改條款及/或調整保費及最高賠償額的權利。

12. 仲裁

所有因本保單而引起之歧見須根據仲裁條例(及不時之修訂)作出決定。若然各方對委任一名仲裁人不能達成協議，則有關選擇需交由香港國際仲裁中心之主席作出決定。在這裡明確申明，取得仲裁裁決為任何有關本保單之訴訟權利或官司之先決條件。若然本公司對保單持有人、受保人或家庭就任何依本保單提出之索償表示無須負責，而該索償又未在作出拒賠日後十二(12)個曆月內轉交仲裁，則無論如何，該索償將被視作已被放棄，而此後亦不得再追討。

13. 信託或轉讓之禁制

本保單不可轉讓，同時保單持有人或受保人保證本保單並不隸屬於任何信託，亦不涉及任何留置權或押記。本保單將於承保期內由保單持有人或受保人擁有。

14. 法律及司法管轄權

本保單在所有方面均受香港法律管限，並按香港法律釋義。對於本保單有關的任何事項所產生的爭議、索償或法律訴訟，香港法院將具有唯一和獨有的司法管轄權。

15. 錯誤與遺漏

整理記錄時的文書錯誤不應使在其他方面均有效的保障項目失效，亦不會使在其他方面均已有效地終止的保障項目繼續有效。若受保人的年齡或出生日期、或其他與受保旅程、或受保人或家庭有關的相關資料無意中報錯，以致影響本保單之保費、賠償或保障範圍或任何條款，則本公司將按真實的年齡及資料來釐訂實際保費、及決定是否就本保單的條款給予賠償，並決定賠償額。若本公司認為應按本保單支付賠償，則絕對有權酌情調整保費。本公司亦有權在支付本保單之任何保障時扣除任何保費差額。

16. 緊急救援通知

(1) 當生命受到威脅的情況，受保人或其代表應設法以合適及即時的方式安排緊急轉送到事發地點就近的醫院及儘快聯絡緊急服務供應商以提供適當的資料。

(2) 倘若在通知緊急服務供應商前，受保人因身體受傷或疾病入住醫院，受保人或其代表須在可能的情況下在該緊急情況發生或與此直接相關的併發症出現後三(3)天內聯絡緊急服務供應商，在未接獲通知的情況下，緊急服務供應商不會承擔於此保單的責任。

17. 運送援助

在進行醫療運送的情況下，為使容易及迅速處理，受保人或其代表需提供以下資料：

(1) 受保人入住的醫院或其他醫療設施的名稱、地址及電話號碼，及

(2) 受保人的主診醫生姓名、地址及電話號碼，及如必要，受保人的家庭醫生資料。

18. 緊急救援服務

(1) 緊急服務供應商的醫療隊伍或其他代表可隨時接觸受保人以評估受保人的情況，如受保人在沒有合理辯解的情況下拒絕該評估，受保人將不符合資格接受進一步的醫療援助。

(2) 醫療隊伍將根據每一事件的具體情況決定醫療運送是否適當及選擇該次運送日期及方式。

(3) 在緊急服務供應商為受保人進行醫療運送時，受保人須向緊急服務供應商交回其交通票據未有使用的部份或其價值，以抵銷進行醫療運送的成本。

(4) 在未獲緊急服務供應商同意前，受保人或任何人士將不會獲任何開支補償。

(5) 受保人須使用合理方法避免產生緊急情況。

(6) 受保人須盡力與緊急服務供應商合作，確保其可從相關途徑取得所有文件或收據，並自行負擔費用以協助緊急服務供應商履行必要的程序。

(7) 受保人及其代表應根據本公司 / 緊急服務供應商為調查及核實索償提出的合理要求，不時提供所有必要的資料及協助。如必需在確認保單責任前接受緊急服務，本公司可自行

酌情決定在無損害原則的基礎上提供該服務，惟受保人或其代表須就其應承擔因使用緊急服務而產生的費用之全數或差額簽署承諾書（須附帶必要之個人資料）。

(8) 受保人須在緊急援助事故發生後兩(2)年內就該事故提出索償或採取法律行動，否則當作放棄論。

收集個人資料聲明

您提供的資料，為中銀集團保險有限公司(“本公司”)提供保險業務所需，並可能使用於下列目的:

(1) 處理及審批您的保險申請或您將來提交的保險申請；
(2) 執行您保單的行政工作及提供與您保單相關的服務；
(3) 分析或調查、處理及支付您保單有關的索償；
(4) 發出繳交保費通知及向您收取保費及欠款；
(5) 任何與保險有關的產品或服務的任何更改、變更、取消或續期；
(6) 就以上用途聯絡您；
(7) 本公司行使任何代位權；
(8) 其它與上述用途有直接關係的附帶用途；及
(9) 遵循適用法律，條例及業內守則及指引。

本公司亦可因應上述用途將您的個人資料移轉予下列各方(不論在香港特別行政區境內或境外)：

(a) 就上述用途，向本公司提供行政、通訊、電腦、付款、保安及其它服務的第三方代理、承包商及顧問（包括：醫療服務供應商、緊急救援服務供應商、電話促銷商、郵寄及印刷服務商、資訊科技服務供應商及數據處理服務商）;
(b) 處理索賠個案的理賠師、理賠調查員及醫療顧問；
(c) 追討欠款的收數公司或索償代理；
(d) 保險資料服務公司及信貸資料服務公司；
(e) 再保公司及再保經紀；
(f) 您的保險經紀（若有）;
(g) 本公司的法律及專業業務顧問；
(h) 本公司的關連公司(以《公司條例》內的定義為準)；
(i) 現存或不時成立的任何保險公司協會或聯會或類同組織(「聯會」)及其會員，以達到任何上述或有關目的，或以便「聯會」執行其監管職能，或其他基於保險業或任何「聯會」會員的利益而不時在合理要求下賦予「聯會」的職能；
(j) 透過「聯會」移轉予任何「聯會」的會員，以達到任何上述或有關目的；
(k) 任何有關的公司，或任何其他從事與保險或再保險業務有關的公司，或與保險業務有關的中介人或索償或調查或其他服務提供者，以達到任何上述或有關目的；
(l) 任何負責處理保險相關投訴及/或爭議之行業或監管機構；及
(m) 法例要求或許可的政府機關。

您在此授權本公司可向「聯會」從保險業內收集的資料中查閱及/或核對您任何資料。

此外，經您同意，本公司可能會以其它方式使用及披露您的個人資料。

您有權查閱及要求更正由本公司持有有關您及/或受保人的個人資料。如有需要，可向本公司法律與合規部提出 (電話：2867 0888，傳真：3906 9939)。

使用資料作直接促銷

在取得您的有關書面同意下(包括您不反對之表示)，本公司擬使用您的資料作直接促銷。本公司會遵從條例內有關直接促銷的規定。請注意以下：

(1) 本公司持有您的姓名、聯絡詳情、產品及服務組合信息及統計資料可不時被本公司用於直接促銷；
(2) 以下服務類別可作推廣：
    (i) 財務、保險及相關服務和產品；
    (ii) 獎賞、年資獎勵或優惠計劃及相關服務和產品；
    (iii) 本公司的聯名合作夥伴提供之服務和產品(有關服務和產品的申請表上會提供聯名合作夥伴的名稱(視屬何情況而定))；及
    (iv) 為慈善及或非牟利的目的之捐款及資助；
(3) 上述服務、產品及標的可由本公司及/或下述人士提供或(如涉及捐款及資助)募捐：
    (i) 本公司或中銀香港(控股)有限公司或其附屬公司之任何成員；
    (ii) 第三方獎賞、年資獎勵、聯名合作及優惠計劃供應商；
    (iii) 本公司及本集團之聯名合作夥伴(有關服務和產品的申請表上會提供聯名合作夥伴的名稱(視屬何情況而定))；及
    (iv) 慈善或非牟利組織；
(4) 除本公司推廣上述服務、產品及標的外，本公司同時擬提供列明於上述第(1)段之資料至上述第(3)段的所有或其中任何人士，該等人士藉以用於推廣上述服務、產品及標的，並本公司須為此目的取得您的同意(其中包您不反對之表示)；

若您不同意本公司使用或提供其資料予其他人士，藉以用於以上所述之直接促銷，您應通知本公司法律與合規部 (電話：2867 0888, 傳真：3906 9939) 以行使其不同意此安排的權利。

註： 本保單中文譯本只供參考之用，如與英文原文有歧異，概以英文本為準。

賠償限額表

基本保障（第 1 – 9 章）

保障項目及承保範圍	**最高賠償額[1]（每位受保人）（HK$）**	
	優越計劃	**標準計劃**
1. 人身意外	500,000	150,000
- 年齡為 18 歲以下或 70 歲以上之受保人	250,000	75,000
2. 身亡撫恤金	20,000	10,000
（如因疾病身故，最高賠償額為所列金額的 30%）		
3. 醫療及有關費用		
3.1 醫療費用	300,000	100,000
- 年齡為 18 歲以下或 70 歲以上之受保人	150,000	50,000
3.2 回港覆診費用	20,000	5,000
- 中醫治療及跌打之分項限額	1,500 （每天 150）	1,500 （每天 150）
3.3 遺體運返	50,000	N/A
4. 個人行李及財物	3,000 （每件 / 每對 / 每套 1,000）	1,000 （每件 / 每對 / 每套 300）
延伸保障		
個人手提電腦，每件/每對/每套上限	1,000	不適用
5. 旅遊證件及交通票據	2,000	不適用
- 住宿費用之分項限額	每天 500	
6. 個人責任	500,000	不適用
7. 旅程延誤		
7.1 高速鐵路或動車之延誤現金津貼	900	300
- 每滿 3 小時延誤	300	300
7.2 其他公共交通工具之延誤現金津貼	900	300
- 每滿 6 小時延誤	300	300
7.3 額外交通及住宿費用	1,200	600
7.4 寵物照顧服務	每天 200 (最多 3 天)	不適用
8. 取消旅程	5,000	2,500
9. 24 小時緊急支援服務及保障		
住院按金保證	50,000	
緊急護送	實際費用*	
治療後之護送服務	實際費用*	
運返遺體 / 骨灰回國	實際費用*	
轉介服務	法律援助、傳譯及補領遺失旅遊證件或交通票據之轉介服務	
	* 註：80 歲以上之受保人在緊急護送、治療後之護送服務及運返遺體 / 骨灰回國的最高賠償總額調整為以下保額並會與第 3 章 - 醫療及有關費用的保額共用	
	150,000	50,000

註:

1. 以每次旅程計算。