

## Silver

### Travel Insurance & Global Assistance

Cover your trip investment from those unforeseen circumstances that may arise before or during your trip. The Silver Plan provides valuable coverage at an affordable price and includes a waiver of Pre-existing Medical Condition Exclusion if insurance is purchased within 15 days of the initial trip payment.



### Insurance Coverages

| SCHEDULE OF BENEFITS                              |  |
|---|--|
| MAXIMUM LIMIT                                     | COVERAGE   |
| 100% of Insured Trip Cost*                        | Trip Cancellation  |
| 100% of Insured Trip Cost*                        | Trip Interruption  |
| \$500 or 100% of Trip Cost (whichever is greater) | Trip Interruption – Return Air Only                                      |
| \$500   | Trip Delay (Max. \$100/day)  |
| \$750   | Baggage, Personal Effects and Travel Documents (\$50 deductible applies) |
| \$200   | Baggage Delay  |
| \$10,000  | Medical Expense (\$50 deductible applies)                                |
| \$100,000   | Emergency Evacuation & Repatriation of Remains                           |

### Extra Coverage

(when coverage is purchased within 15 day\*\* of Initial Trip Payment)

- Pre-Existing Medical Condition Exclusion Waiver
- Trip Cancellation/Interruption due to Financial Default coverage
- \$25,000 in Accidental Death & Dismemberment (Common Carrier Air Only) coverage

\*\* Day one is the date the initial payment is received.

### Assistance Services

The following non-insurance services are provided by Travel Guard:

Travel Medical Assistance..... Included  
 Worldwide Travel Assistance..... Included  
 LiveTravel® Emergency Assistance..... Included  
 Concierge Services..... Included  
 Personal Security Assistance..... Included



**Family Coverage:** One child age 17 and under will receive coverage at no additional cost for each adult who purchases this plan.

Must be traveling with and related to the primary adult named on the enrollment form. Does not apply to optional coverages. For your plan to provide "kids at no additional cost," the child's trip cost must be equal to or less than the adult traveler(s) trip cost.

### Silver Plan Cost

| Trip Cost Per Person (up to 30 days) | 0-34         | 35-59        | 60-69        | AGE 70-74    | 75-79        | 80-84        | 85+          |
|--------------------------------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|
| \$ 0                                 | \$ 14        | \$ 21        | \$ 27        | \$ 31        | \$ 46        | \$ 58        | \$ 67        |
| \$ 1 - \$ 250                        | \$ 17        | \$ 25        | \$ 31        | \$ 37        | \$ 48        | \$ 67        | \$ 76        |
| \$ 251 - \$ 500                      | \$ 20        | \$ 30        | \$ 34        | \$ 43        | \$ 51        | \$ 77        | \$ 85        |
| \$ 501 - \$ 1,000                    | \$ 35        | \$ 44        | \$ 55        | \$ 75        | \$ 96        | \$ 123       | \$ 145       |
| \$ 1,001 - \$ 1,500                  | \$ 45        | \$ 60        | \$ 75        | \$ 99        | \$ 136       | \$ 161       | \$ 205       |
| \$ 1,501 - \$ 2,000                  | \$ 61        | \$ 80        | \$ 104       | \$ 142       | \$ 175       | \$ 207       | \$ 263       |
| \$ 2,001 - \$ 2,500                  | \$ 78        | \$ 100       | \$ 128       | \$ 174       | \$ 214       | \$ 254       | \$ 330       |
| \$ 2,501 - \$ 3,000                  | \$ 95        | \$ 118       | \$ 154       | \$ 208       | \$ 256       | \$ 297       | \$ 390       |
| \$ 3,001 - \$ 3,500                  | \$ 111       | \$ 125       | \$ 180       | \$ 242       | \$ 292       | \$ 341       | \$ 447       |
| \$ 3,501 - \$ 4,000                  | \$ 126       | \$ 137       | \$ 204       | \$ 274       | \$ 332       | \$ 396       | \$ 501       |
| \$ 4,001 - \$ 4,500                  | \$ 142       | \$ 157       | \$ 260       | \$ 310       | \$ 371       | \$ 459       | \$ 562       |
| \$ 4,501 - \$ 5,000                  | \$ 158       | \$ 178       | \$ 291       | \$ 346       | \$ 412       | \$ 513       | \$ 619       |
| \$ 5,001 - \$ 5,500                  | \$ 182       | \$ 210       | \$ 319       | \$ 403       | \$ 451       | \$ 573       | \$ 678       |
| \$ 5,501 - \$ 6,000                  | \$ 203       | \$ 240       | \$ 347       | \$ 441       | \$ 491       | \$ 632       | \$ 738       |
| \$ 6,001 - \$ 6,500                  | \$ 220       | \$ 262       | \$ 379       | \$ 479       | \$ 530       | \$ 694       | \$ 795       |
| \$ 6,501 - \$ 7,000                  | \$ 239       | \$ 284       | \$ 413       | \$ 519       | \$ 573       | \$ 755       | \$ 860       |
| \$ 7,001 - \$ 8,000                  | \$ 263       | \$ 309       | \$ 462       | \$ 586       | \$ 653       | \$ 847       | \$ 977       |
| \$ 8,001 - \$ 9,000                  | \$ 295       | \$ 334       | \$ 512       | \$ 654       | \$ 734       | \$ 946       | \$ 1,102     |
| \$ 9,001 - \$ 10,000                 | \$ 328       | \$ 363       | \$ 567       | \$ 723       | \$ 822       | \$ 1,044     | \$ 1,226     |
| <b>Umbrella Package</b>              | <b>\$ 10</b> | <b>\$ 15</b> | <b>\$ 20</b> | <b>\$ 25</b> | <b>\$ 35</b> | <b>\$ 45</b> | <b>\$ 55</b> |

Above rates do not include a \$6 service fee. An additional \$3 service fee applies to each additional coverage purchased. Please choose your plan cost from the above pricing chart based on your age at the time of insurance purchase. For trips over \$10,000, or trips exceeding 30 days, call 1.800.826.1300 or visit [www.TravelGuard.com](http://www.TravelGuard.com). Pricing available up to \$100,000 trip cost. You must insure the pre-paid non-refundable portions of your trip. Coverage must be purchased at least 24 hours prior to departure.

### Optional Coverages

The following will be included if elected and appropriate costs have been paid.

**Accidental Death and Dismemberment (Common Carrier Air Only)** ..... Amount Selected (Up to a Max. of \$500,000)

PLAN COST: \$9 per \$100,000 of coverage

**Renter's Collision Insurance** ..... \$35,000 (\$250 Deductible)

PLAN COST: \$9 per day, per car

#### Umbrella Package:

Medical Expense Upgrade ..... Additional \$10,000

Emergency Evacuation ..... Additional \$100,000

Baggage, Personal Effects and Travel Documents and Medical Expense deductibles waived

PLAN COST: See pricing chart

All coverages are per person.

\* Coverage only applicable to prepaid, non-refundable trip costs identified on the enrollment form and if the required plan cost has been paid.

### Questions?

CALL TOLL FREE: **1.800.826.1300**

Refer to product 808838. Coverage only available to WA residents.



## DETAILS OF COVERAGES (Restrictions apply)

For complete coverage information, please refer to the Policy prior to purchase.

### Travel Insurance Coverage

**Trip Cancellation & Interruption:** Reimburses prepaid, non-refundable expenses if you must cancel or interrupt your Trip due to Unforeseen:

- Sickness, injury, or death of you, your Family Member, Traveling Companion, or Business Partner. Cancellation due to an injury or Sickness of a Family Member must be because their condition is life-threatening, or because the Family Member requires your or a Traveling Companion's care;
- Financial Default of an airline, cruise line, or tour operator. This coverage applies only if: (1) you purchased this coverage within 15 days of initial trip payment; and (2) the Financial Default occurs more than 14 days after your coverage effective date;
- Inclement Weather causing delay or cancellation of travel for at least 24 consecutive hours;
- Strike resulting in the complete cessation of travel services at the point of departure or Destination;
- Your Primary Residence or Destination being made uninhabitable by vandalism, burglary, or Natural Disaster;
- You or your Traveling Companion being subpoenaed, required to serve on a jury, hijacked, or quarantined;
- You or your Traveling Companion being called into active military service or having leave revoked or being reassigned;
- A Terrorist Incident in a City listed on your itinerary within 30 days of your scheduled arrival.

**Trip Interruption – Return Air Only:** Reimburses the additional airline transportation expenses incurred by you to reach the Return Destination for Trip Interruptions due to one of the Unforeseen events listed above. However, the benefit payable above will not exceed the cost of economy airfare (or the same class of your original tickets) by the most direct route, less any refunds paid or payable.

**Trip Delay:** Reimburses up to \$100 a day to the Maximum Limit shown on the Schedule of Benefits for Reasonable Additional Expenses for meals, accommodations, taxi fares, and essential telephone calls, if your Trip is delayed for more than 12 hours due to covered reasons.

### Baggage Insurance Coverage

**Baggage, Personal Effects and Travel Documents:** Can reimburse you if your Baggage is lost, stolen, or damaged while on your Trip, subject to the Maximum Limit. This coverage is in excess of any other coverage or indemnity. Coverage subject to a \$50 deductible.

**Baggage Delay:** If your Baggage is delayed more than 24 hours while on a Trip, you can be reimbursed for the purchase of Necessary Personal Effects, subject to the Maximum Limit.

### Medical Expense & Emergency Evacuation Coverage

**Medical Expense:** Pays up to the Maximum Limit shown on the Schedule of Benefits for necessary medical expenses due to Injury or Sickness for up to one year, provided initial treatment was received during the Trip. Coverage subject to a \$50 deductible.

**Emergency Evacuation & Repatriation of Remains:** Covers evacuation and transportation as directed by a physician to the nearest adequate medical facility (home in the event of death or if medically required) due to an Injury or Sickness occurring while on a Trip. Pays for special medical escort if recommended in writing by the attending physician.

### Optional Additional Coverages

**Amount Purchased (up to \$500,000) Accidental Death & Dismemberment (Common Carrier Air Only):** Coverage for accidental death or dismemberment that occurs when traveling on a regularly scheduled flight or charter, subject to the Maximum Limit shown in the Schedule.

**Renter's Collision Insurance:** \$35,000 in primary coverage, subject to a \$250 deductible. Covers physical damage to a rental car for which the car rental contract would hold you responsible.

**Umbrella Package:** Valuable addition to increase your coverage limits. The Medical Expense and Emergency Evacuation benefits will double. The Baggage, Personal Effects and Travel Documents and Medical Expense deductibles will be waived.

**GENERAL EXCLUSIONS:** The following exclusions apply to Trip Cancellation, Trip Interruption and Trip Delay: This Policy does not cover any loss caused by or resulting from: (a) intentionally self-inflicted Injury, suicide, or attempted suicide of the Insured, Family Member, Traveling Companion or Business Partner while sane or insane; (b) pregnancy, childbirth, or elective abortion, other than Complications of Pregnancy; (c) participation in professional athletic events, motor sport, or motor racing, including training or practice for the same; (d) mountaineering where ropes or guides are normally used. The ascent or descent of a mountain requiring the use of specialized equipment, including but not limited to pickaxes, anchors, bolts, crampons, carabineers, and lead or top-rope anchoring equipment; (e) war or act of war, whether declared or not, civil disorder, riot, or insurrection; (f) operating or learning to operate any aircraft, as student, pilot, or crew; (g) air travel on any air-supported device, other than a regularly scheduled airline or air charter company; (h) loss or damage caused by detention, confiscation, or destruction by customs; (i) any felonies committed by the Insured; (j) Mental, Nervous or Psychological Disorder or rest cures; (k) if the Insured's tickets do not contain specific travel dates (open tickets); (l) use of drugs, narcotics, or alcohol, unless administered upon the advice of a Physician; (m) any failure of a provider of travel related services (including any Travel Supplier) to provide the bargained-for travel services or to refund money due the Insured; (n) Experimental or Investigative treatment or procedures; (o) any loss that occurs at a time when this coverage is not in effect; (p) traveling for the purpose of securing medical treatment; (q) care or treatment which is not Medically Necessary, except for related reconstructive surgery resulting from trauma, infection, or disease.

**The following exclusions all apply to Accidental Death & Dismemberment Common Carrier Only, Medical Expense and Emergency Evacuation and Repatriation of Remains:** This Policy does not cover any loss caused by or resulting from: (a) intentionally self-inflicted Injury, suicide, or attempted suicide of the Insured, Family Member, Traveling Companion or Business Partner while sane or insane; (b) pregnancy other than Complications of Pregnancy (c) war or act of war, whether declared or not, participation in a civil disorder, riot, or insurrection; (d) operating or learning to operate any aircraft, as student, pilot, or crew; (e) air travel on any air-supported device, other than a regularly scheduled airline or air charter company; (f) any felonies committed by the Insured; (g) Mental, Nervous or Psychological Disorder; (h) alcoholism and drug addiction; (i) care or treatment which is not Medically Necessary, except for related reconstructive surgery resulting from trauma, infection or disease.

#### PRE-EXISTING MEDICAL CONDITION EXCLUSION:

The Company will not pay for any Loss or expense incurred as the result of an injury, Sickness, or other condition of you, a Traveling Companion, Business Partner or Family Member which, within the 180-day period immediately preceding and including your coverage effective date: (a) first manifested itself, worsened, became acute or had symptoms which would have prompted a reasonable person to seek diagnosis, care, or treatment; (b) for which care or treatment was given or recommended by a Physician; or (c) required taking prescription drugs or medicines, unless the condition for which the drugs or medicines are taken remains controlled without any change in the prescription drugs or medicines.

**The Company will waive this exclusion up to the first \$15,000 of Trip Cost per person if you meet the following conditions:** 1. You purchase the plan within 15 days of making the initial trip payment; 2. The amount of Trip Cancellation coverage purchased at that time equals the full cost of all prepaid, non-refundable payments or deposits applicable to the Trip at the time of purchase and the cost of any subsequent arrangement(s) added to the same Trip must be insured within 15 days of the date of payment or deposit for any subsequent Trip arrangement(s); 3. You must be medically able to travel when plan cost is paid.

This plan provides insurance coverage that only applies during the covered trip. You may have coverage from other sources that provides you with similar benefits but may be subject to different restrictions depending upon your other coverages. You may wish to compare the terms of this policy with your existing life, health, home, and automobile insurance policies. If you have any questions about your current coverage, call your insurer or insurance agent or broker. Coverage is offered by Travel Guard Group, Inc (Travel Guard). California lic. no.0B93606, 3300 Business Park Drive, Stevens Point, WI 54482, www.travelguard.com. CA DOI toll free number: 800-927-HELP. This is only a brief description of the coverage(s) available. The Policy will contain reductions, limitations, exclusions and termination provisions. Insurance underwritten by National Union Fire Insurance Company of Pittsburgh, Pa., a Pennsylvania insurance company, with its principal place of business at 175 Water Street, 15th Floor, New York, NY 10038. It is currently authorized to transact business in all states and the District of Columbia. NAIC No. 19445. Coverage may not be available in all states. Your travel retailer may not be licensed to sell insurance, and cannot answer technical questions about the benefits, exclusions, and conditions of this insurance and cannot evaluate the adequacy of your existing insurance. The purchase of travel insurance is not required in order to purchase any other product or service from the travel retailer. Travel assistance services provided by Travel Guard.