

Student Travel

for DECA

CHUBB®

Student Travel Insurance Plan

This Proposal provides a general summary of policy benefits and provisions; for complete details please refer to the policy contract for all conditions, limitations and provisions.

Rev. 1.10.16

Schedule of Benefits and Rates

The following are **Benefit Amounts** for all benefits provided under this policy:

Emergency Out-of-Country Medical and Medical Evacuation and Repatriation

Benefit Amount for Emergency Out-of-Country Medical \$2,000,000

Benefit Amount for **Medical Evacuation** or **Repatriation** \$100,000

Benefit Amount for **Family Travel Expense** \$5,000

Benefit Amount for **Accidental Death** \$50,000

Maximum **Benefit Amount** \$2,000,000

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Baggage Delay

Required time period of delay: 24 hours

Benefit: \$150 for each 24 hour delay.

Maximum **Benefit Amount**: \$750

Lost or Damaged Baggage and Personal Property

Benefit Amount for any one item or set of items \$1,000

Jewellery, Watches, Musical Instrument, Cameras, Video Recorders and other

Electronic Equipment \$1,000

Benefit Amount for document replacement \$750

Cash \$500

Maximum **Benefit Amount** \$3,000

Trip Cancellation

Benefit Amount Tour Price (less non-refundable deposits)

Trip Interruption

Benefit Amount

Flight Cost: \$2,000

Additional Accommodation: \$1,000

Additional Meals: \$250

Ground Transportation \$500

Maximum **Benefit Amount**: **\$3,750**

Rates

| Tour Type | Rate |
|---------------------|----------------|
| Flights | \$30.00 |
| Medical only | \$10.00 |

Scope of Coverage

Emergency Out-of-Country Medical and Medical Evacuation and Repatriation

A. Emergency Out-of-Country Medical

If an **Insured Person** suffers **Accidental Bodily Injury** or **Sickness** which arises suddenly and unexpectedly during an insured **Hazard** and results in medical expenses being paid while the **Insured Person** is outside of the **Insured Person's** country of residence, then **We** will reimburse medical expenses up to the **Benefit Amount** for medical expenses, shown in the Schedule of Benefits. The medical expenses must be incurred while participating in the **Insured Person's** scheduled trip location. The medical expenses must be ordered by a **Physician** who certifies that the expenses are necessary to prevent death or serious deterioration of the **Insured Person's** medical condition. The **Benefit Amount** for the medical expense is payable on an excess basis. **We** will determine the **Reasonable and Customary Charge** for the covered medical expense. **We** will then reduce that amount by amounts already paid or payable by the Government Health Insurance Plan. **We** will pay the resulting amount but in no event will we pay more than the **Benefit Amount** for medical expenses, shown in the Schedule of Benefits. The medical expenses must be the result of **Medical Services** that are coordinated or arranged by **Our Assistance Services Administrator**. Failure to notify the assistance service administrator and your tour operator will result in a maximum benefit payment of \$50,000.

Limitations on Emergency Out-of-Country Medical:

This benefit does not apply to **Accident**, **Accidental Bodily Injury** or **Sickness** or loss caused directly or indirectly from the **Insured Person**:

- 1) travelling against the advice of a **Physician**;
- 2) travelling while on a waiting list for specified medical treatment;
- 3) travelling for the purpose of obtaining medical treatment;
- 4) travelling while knowingly pregnant; or

This benefit does not apply if the **Insured Person** is travelling in a country for which there is a legal prohibition against providing insurance of any **Accidental Bodily Injury** or **Sickness** or loss.

This benefit does not apply to:

- 1) medical or dental treatment rendered within an **Insured Person's** province of residence;
- 2) dental expenses, other than for the immediate relief of dental pain; or
- 3) routine eye care; or
- 4) cosmetic surgery, unless such cosmetic surgery is rendered necessary as a result of a loss covered under this policy; or
- 5) medical expense incurred as the result of the **Insured Person's** emotional trauma or mental disease; or
- 6) normal pregnancy or childbirth.

B. Medical Evacuation & Repatriation

If an **Insured Person's Accidental Bodily Injury** or **Sickness** occurs while insured under a **Hazard** and requires the **Medical Evacuation** or **Repatriation** of the **Insured Person** while the **Insured Person** is on a covered trip, then **We** will pay the **Covered Expenses** for such **Medical Evacuation** or **Repatriation** up to the **Benefit Amount** for **Medical Evacuation and Repatriation**, shown in the Schedule of Benefits. The **Benefit Amount** for **Medical Evacuation** or **Repatriation** is payable in addition to any other applicable **Benefit Amounts** under this policy.

This insurance applies only if the covered trip:

- 1) is outside the **Insured Person's** country of primary residence; and
- 2) lasts no more than 90 consecutive days.

The **Medical Evacuation** or **Repatriation** must be ordered by a **Physician**, who certifies that the **Medical Evacuation** or **Repatriation** is necessary to prevent death or serious deterioration of the **Insured Person's** medical condition. The **Medical Evacuation** or **Repatriation** must be approved and arranged by **Our Assistance Services Administrator**.

The **Benefit Amount** for **Medical Evacuation** or **Repatriation** is payable on an excess basis. **We** will determine the charges for **Medical Evacuation** or **Repatriation**. **We** will then reduce that amount by amounts already paid or payable by the Government Health Insurance Plan. **We** will pay the resulting **Benefit Amount**, but in no event will **We** pay more than the Maximum **Benefit Amount** for **Medical Evacuation** or **Repatriation** shown in the Schedule of Benefits.

C. Hospital Admission Guaranty

If an **Insured Person's Accidental Bodily Injury** or **Sickness** occurs during an insured **Hazard** and requires **Emergency Medical Treatment** while the **Insured Person** is on a covered trip, then **We** will guarantee payment of the **Hospital Admission Guaranty** incurred for such **Emergency Medical Treatment** up to the **Benefit Amount** for **Hospital Admission Guaranty**, shown in the Schedule of Benefits. The **Assistance Services Administrator** must approve the **Hospital Admission Guaranty**.

D. Family Travel Expense

If an **Insured Person's Accidental Bodily Injury** or **Sickness** occurs during an insured **Hazard** and requires a **Hospital** stay for more than three (3) days while the **Insured Person** is on a covered trip, then **We** will pay the **Benefit Amount** for **Family Travel Expense**, if all the following conditions are met:

- 1) the **Insured Person** is confined to a **Hospital**; and
- 2) the **Hospital** is at least 100 kilometres from the **Insured Person's** permanent residence; and
- 3) all transportation arrangements for an **Immediate Family Member** are made by **Our Assistance Services Administrator** and are by the most direct and economical route.

E. Political Evacuation

If an **Insured Person** is on a covered trip; while insured under a **Hazard**; and Foreign Affairs and International Trade Canada issues a **Travel Warning**, for the country where the **Insured Person** is traveling, then **We** will reimburse **Political Evacuation Expenses** up to the **Benefit Amount** for **Political Evacuation Expenses**, shown in the Schedule of Benefits. All arrangements must be approved and arranged by **Our Assistance Services Administrator** and shall be by the most

direct and economical route.

This benefit does not apply to an **Insured Person** traveling to Iraq or Afghanistan.

F. Accidental Death

In the event of your death, as a result of an accident which occurs during the Period of Coverage and which is covered under the Medical Expenses section of this policy, the Insurance Company will pay your estate a lump sum benefit of \$50,000.

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Baggage Delay

We will reimburse the **Insured Person** up to the **Benefit Amount** shown in the Schedule of Benefits, in the event of a **Baggage Delay**. Our payment is limited to expenses incurred for the emergency purchase of essential items needed by the **Insured Person** while on a covered trip and at a destination other than the **Insured Person's** primary residence.

The **Baggage Delay Benefit Amount** is excess over any indemnity (including any reimbursements by the airline, cruise line, railroad, station authority, occupancy provider) available to the **Insured Person**.

Essential items not covered by **Baggage Delay** include, but are not limited to:

- 1) contact lenses, eyeglasses, sunglasses or hearing aids;
- 2) money and currency (including any form thereof), credit cards, securities, tickets, documents, items pertaining to business, paintings, statuary, china, breakage of fragile articles, glass objects, art objects, antiques, household effects;
- 3) jewellery and watches; or
- 4) cameras, camera equipment and sport equipment.

We will not reimburse the **Insured Person** for **Baggage Delay** unless the delay was reported by the **Insured Person** to the **Common Carrier**.

Payment of this benefit is subject to **Our** receipt of satisfactory **Proof of Loss**. **Proof of Loss** includes, but is not limited to:

- 1) copies of the notification and reporting filed with the **Common Carrier** and all related correspondence;
- 2) details of the amount paid or payable by the **Common Carrier** responsible for the loss or damage, description of the contents, cost determination of contents and all other appropriate documents and correspondence; and
- 3) receipts for emergency purchase of essential items.

Lost or Damaged Baggage and Personal Property

A. Lost or Damaged Baggage

We will reimburse the **Insured Person** the amount actually paid by the **Insured Person** for direct physical loss or damage to **Checked Baggage** or **Carry-On Baggage** and personal property contained therein, up to the **Benefit Amount** shown in the Schedule Benefits, if direct physical loss (including **theft**) of **Checked Baggage** or **Carry-On Baggage** occurs while the **Insured Person** is on a covered trip. If the **Insured Person** chooses not to replace the **Checked Baggage** or **Carry-On Baggage** or items therein, then **We** shall not pay more than the **Actual Cash Value** for such **Checked Baggage** or **Carry-On Baggage** or items.

The **Checked Baggage** or **Carry-On Baggage** or **Carry-On Baggage** Benefit is payable on an excess basis over and above any reimbursements by the airline, cruise line, railroad, station authority, occupancy provider, or any other valid or collectible insurance available to the **Insured Person**.

We will not reimburse the **Insured Person** for:

- 1) expenses for which no charge would normally be made in the absence of insurance;
- 2) property illegally acquired, kept, stored or transported;
- 3) loss or damage resulting from deterioration or wear and tear;

4) loss or damage caused by any imprudent action or omission by the **Insured Person**;

5) money and currency (including any form thereof), credit cards, securities, tickets, documents, items pertaining to business, paintings, statuary, china, breakage of fragile articles, glass objects, art objects, antiques, household effects; and

6) confiscation or detention by any customs agent or other authority.

We will not reimburse for Checked Baggage or Carry-On Baggage unless the loss or damage was reported by the Insured Person to the Common Carrier within the Common Carrier's required timeframe for notification. Proof of submission of the loss or damage report to the Common Carrier must be provided.

Payment of this benefit is subject to **Our** receipt of satisfactory **Proof of Loss. Proof of Loss** includes, but is not limited to:

1) copies of the notification and reporting filed with the **Common Carrier** and all related correspondence; and

2) details of the amount paid or payable by the **Common Carrier** responsible for the loss or damage, description of the contents, cost determination of contents and all other appropriate documents and correspondence.

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B. Personal Property

We will reimburse the **Insured Person** up to the **Benefit Amount**, shown in the Schedule of Benefits, for an **Insured Person's** personal property that is lost as a result of **Theft** or fire. **Our** liability will be the **Actual Cash Value** of the article at the time of **Theft**. If the **Insured Person** chooses not to replace the personal property, then **We** shall not pay more than the **Actual Cash Value** for such personal property.

The Personal Property **Benefit Amount** is payable on an excess basis over and above any amount due from any indemnity (including any reimbursements by the airline, cruise line, railroad, station authority, occupancy provider) available to the **Insured Person**.

We will not reimburse the **Insured Person** for:

- 1) expenses for which no charge would normally be made in the absence of insurance;
- 2) loss or damage caused by committing or attempting to commit an illegal act or criminal act
- 3) property illegally acquired, kept, stored or transported;
- 4) loss or damage resulting from deterioration or wear and tear;
- 5) loss or damage caused by any imprudent action or omission by the **Insured Person**;
- 6) **Theft** from an unattended vehicle unless it was locked and there was visible evidence of forced entry;
- 7) money and currency (including any form thereof) in excess of \$500, credit cards, securities, tickets, documents, items pertaining to business, paintings, statuary, china, breakage of fragile articles, glass objects, art objects, antiques, household effects;
- 8) **Theft** due to confiscation or detention by any customs agent or other authority; or
- 9) **Theft** not reported to the police or hotel within forty-eight (48) hours of discovery or where no attempt has been made to recover the items.

Payment of this benefit is subject to **Our** receipt of satisfactory **Proof of Loss**. **Proof of Loss** includes, but is not limited to:

- 1) a copy of the police report detailing the **Theft**; and
- 2) description and cost determinations of the stolen property.

C. Document Replacement

We will reimburse the **Insured Person** the amount actually paid by the **Insured Person**, up to the **Benefit Amount** shown in the Schedule Benefits, for the replacement of one or more of the following documents, in the event of loss or **Theft**: passport, driver's licence, birth certificate or travel visa.

If your passport and/or travel visa is lost or stolen during your insured trip, you will be reimbursed for the reasonable and customary cost for a replacement passport and/or travel visa, and up to a maximum of \$500 with respect to travel and accommodation expenses actually incurred while waiting to receive the replacement passport and/or travel visa during your insured trip or after you return home.

Trip Cancellation and Interruption

We will reimburse up to the **Trip Cancellation Benefit Amount**, shown in the Schedule of Benefits, if a **Covered Loss** causes the **Insured Person's** **Trip Cancellation**. We will reimburse for **Non-Refundable** prepaid travel expenses charged by a **Tour Operator**;

Trip Cancellation of your insured trip must result from any one of the UNFORESEEN EVENTS listed below occurring during the period of coverage:

- i. A serious injury or illness, grave illness leading to hospitalization or death of a Family Member or you;
- ii. You are being required to serve on a jury, subpoenaed, activated into military service, or having his or her home made uninhabitable by fire or flood or other natural disaster;
- iii. Death, admission to hospital or quarantine of the person with whom you have arranged overnight accommodation for the majority of your insured trip.
- iv. You or your parent/legal guardian's involuntary loss of permanent employment (excluding contract or self-employment), due to layoff or dismissal without just cause, provided that you had no knowledge of such action prior to the date of application for insurance.
- v. You are directly involved in a traffic accident while travelling to the departure point of their trip;
- vi. The Government of Canada issuing an "Avoid Non-Essential Travel" or "Avoid All Travel" Travel Advisory for the country or a region of the country that is a destination on the trip;
- vii. Should the school board cancel the trip due to: a) a teacher's labour strike or there is a determination that there is a risk of harm due to terrorism to you during the trip when you are scheduled to travel to a specific region of a country.

To cancel a trip prior to your scheduled departure you must notify your travel provider within 10 days following the cause of the cancellation.

Trip Interruption of your insured trip must result from any one of the UNFORESEEN EVENTS listed below occurring during the period of coverage:

- i. You are hospitalized during the trip as the result of a serious injury or illness;
- ii. A serious injury, grave illness leading to hospitalization or death of a Family Member during the trip.
- iii. Forces of nature; Weather conditions, earthquakes or volcanic eruptions causing the scheduled carrier, on which you are booked to travel, to be delayed for a period of at least three (3) days of the duration of your insured trip.
- iv. If your passport and/or travel visa is lost or stolen during your insured trip, you will be reimbursed for reasonable travel and accommodation expenses until your replacement travel documentation is replaced. You will also be reimbursed for the change fee charged by the airline up to a maximum of \$1,000 per person.

If a trip is interrupted due to any of the above covered reasons, you will be reimbursed, up to a maximum of \$2,000, for the cost of economy coach, train or airfare by the most direct route, less any refunds paid to you, in order to reach the return destination or to travel from the place where the trip was interrupted to where the trip can be rejoined. The Insurance Company will also reimburse you for reasonable costs resulting from a travelling Family Member's trip being delayed or interrupted for one of the covered reasons and your trip is not. The Insurance Company will also reimburse you for reasonable additional accommodation (up to a maximum of \$1,000), transportation (up to a maximum of \$500 total) and meal (up to a maximum of \$250) expenses, if a travelling Family Member must remain hospitalized. A daily maximum of \$250/day for accommodations, \$100/day for transportation and \$50/day for meals applies.

Original receipts must be provided when claiming these benefits with the claims handler.

In no event will **We** pay more than the **Trip Cancellation or Interruption Benefit Amounts** shown in the Schedule of Benefits. The **Insured Person** will relinquish to us any unused vouchers, tickets, coupons or travel privileges for which **We** have reimbursed the **Insured Person**.

The **Trip Cancellation and Trip Interruption** benefits is payable on an excess basis over and above any amount due from any other valid or collectible insurance or any other form of reimbursement payable by those responsible for the loss.

This benefit does not apply to a **Covered Loss** caused directly or indirectly from:

1) any **Accidental Body Injury** or **Sickness** or medical condition (other than a **Minor Ailment**) that was not **Stable** at any time during the 90 days prior to the date of purchase of the **Insured Person's** travel arrangements;

2) any **Accidental Body Injury** or **Sickness** or medical condition which, prior to the effective date of coverage:

a. was such as to render medical consultation or hospitalization expected;

b. has been shown, by prior medical history, as probable or certain to occur;

3) expenses for which no charge would normally be made in the absence of insurance;

4) committing or attempting to commit an illegal act or a criminal act;

5) participation in and/or voluntary exposure to any risk from: war or act of war, whether declared or undeclared; invasion or act of foreign enemy; declared or undeclared hostilities; civil war, riot, rebellion; revolution or insurrection; act of military power; or any service in the armed forces;

6) **Accidental Body Injury** or **Sickness** or medical condition if the **Insured Person** or an **Insured Person's Immediate Family Member** are awaiting or undergoing any surgery, medical test(s) examination(s), monitoring or consultation prior to the effective date of coverage:

7) medication, drugs or toxic substance abuse or overdose, alcohol abuse, alcoholism or an accident while being impaired by drugs or alcohol suicide (including any attempt thereat) or self-inflicted injury whether or not the **Insured Person** is sane;

8) a disorder, disease, condition or symptom that is emotional, psychological, or mental in nature unless the **Insured Person** is hospitalized on the date of occurrence for the event that caused a **Trip Cancellation**;

9) a trip undertaken for the purpose of visiting a sick or injured person when the covered trip is cancelled, interrupted or delayed due to such person's medical condition or death therefrom;

10) treatment or hospitalization of mother or child(ren) as a result of pregnancy, miscarriage, childbirth or complications of any of these conditions occurring in the nine weeks before and/or after the expected delivery date;

11) flight accident (unless the **Insured Person** is travelling as a fare-paying passenger on a commercial airline).

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Payment of this benefit is subject to **Our** receipt of satisfactory **Proof of Loss**. **Proof of Loss** includes, but is not limited to:

1) documentation detailing the reason for the cancellation, including evidence of the nature of the **Accidental Body Injury** or **Sickness** such as certified copies of medical evidence reports, attending **Physician** statements, medical receipts and related documentation;

2) for cancellation for other than **Accidental Body Injury** or **Sickness**, any appropriate documentation that officially explains the cause of the **Insured Person's Trip Cancellation**. Any explanation of **Covered Losses** along with an **Insured Person's** original itemized bills, receipts, and proof of other insurance payments;

3) original unused tickets, copies of invoices, proof of payments, and other documents that substantiate the cost or occurrence of the **Trip Cancellation**;

4) documentation of refunds received from the **Tour Operator(s)** and/or **Common Carrier(s)**;

5) copy of the supplier's literature that describes penalties; and

6) a letter of the **Tour Operator** or an itemized bill from the travel agent stating the non-refundable amounts of the trip costs.

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Cancellation of Entire Trip by School Board

We will reimburse up to the **Cancellation of Entire Trip by School Board Benefit Amount**, shown in Section III of the Schedule of Benefits, if the **School Board** chooses the **Cancellation of Entire Trip** due to a **Covered Reason**. We will reimburse for **Non-Refundable** prepaid travel expenses charged by the **Policyholder**.

In no event will **We** pay more than the **Cancellation of Entire Trip by School Board Benefit Amount** shown in Section III of the Schedule of Benefits. The **Policyholder** will relinquish to us any unused vouchers, tickets, coupons or travel privileges for which **We** have reimbursed the **Policyholder**.

This benefit does not apply to a loss caused directly or indirectly from:

- 1) expenses for which no charge would normally be made in the absence of insurance;
- 2) committing or attempting to commit an illegal act or a criminal act;
- 3) participation in and/or voluntary exposure to any risk from: war or act of war, whether declared or undeclared; invasion or act of foreign enemy; declared or undeclared hostilities; civil war, riot, rebellion; revolution or insurrection; act of military power; or any service in the armed forces;
- 4) labour disruptions or strikes (legal or illegal).

Payment of this benefit is subject to **Our** receipt of satisfactory **Proof of Loss**. **Proof of Loss** includes, but is not limited to:

- 1) documentation detailing the reason for the cancellation;
- 2) any appropriate documentation that officially explains the cause of the **Cancellation of Entire Trip**. Any explanation of **Covered Reason** along with a **Policyholder's** original itemized bills, receipts, and proof of other insurance payments;
- 3) original unused tickets, copies of invoices, proof of payments, and other documents that substantiate the cost or occurrence of the **Cancellation of Entire Trip**;
- 4) documentation of refunds received from the **Tour Operator(s)** and/or **Common Carrier(s)**;
- 5) copy of the supplier's literature that describes penalties; and
- 6) a letter of the **Tour Operator** or an itemized bill from the travel agent stating the non-refundable amounts of the trip costs.

Section II – Eligibility, Effective Date and Termination

Eligibility

A person becomes insured under this policy if:

- 1) such person is a enrolled on a trip with the group policy holder.
- 2) the required premium for such person has been paid.
- 3) A Canadian resident who is covered under a government health insurance plan
- 4) An intentional student who is covered under a government health insurance plan while temporarily residing in Canada.
- 5) Traveling within or outside of Canada, with the exception of; Syria, Sudan, Cuba, Iran and North Korea

For all Canadian residents who are not covered under a government health insurance plan, the maximum combined coverage under this policy will be limited to \$50,000.

You would be considered ineligible for this policy if;

- 6) If you have been given medical advice not to travel
- 7) If you have been diagnosed with a terminal illness with less than 2 years to live
- 8) If you have a pre-existing medical condition that has not been controlled throughout a 180-period before the coverage takes effect

Effective Date of Insurance for an Insured Person

Insurance for an **Insured Person** becomes effective on the latest of:

- 1) the effective date of this policy;
- 2) the date on which such person first meets the eligibility criteria as an **Insured Person**; or
- 3) the beginning of the period for which required premium is paid for such **Insured Person**.

Termination of Insurance for an Insured Person

Insurance for an **Insured Person** automatically terminates on the earliest of:

- 1) the termination date of this policy;
- 2) the expiration of the period for which required premium has been paid for such **Insured Person**;
- 3) the date on which a person no longer meets the eligibility criteria as an **Insured Person**.

Application for Student Travel Insurance Plan

1. Name of Company _____

2. Company Address _____

City _____ Province _____ Postal Code _____

3. Contact Name _____ Telephone (____) _____

Email Address _____ Fax (____) _____

4. Language Preference English French

5. Name of Your Business: _____

Expected Annual # of Participants* _____

List Travel Destinations: _____

Requested Effective Date (MM/DD/YY) _____

6. Affiliated Companies

1. _____

2. _____

** Participant is a Canadian resident, under age 70 with valid Provincial Health Insurance or an International Student with valid Provincial Health Insurance temporarily residing in Canada, traveling on a Tour operated by the policyholder.*

COMMENTS

All statements, representatives and answers made in this application are consideration for and a basis of the insurance herein requested and whether written or printed, are declared to be true, full and complete.

Signed at _____ this _____ Day of _____ 20 _____

Official _____ (Signature) _____ (Please print your Name and Title)

Please make cheque payable to: Chubb Life Insurance Company of Canada.