



1. **Disease** - sickness, illness, bodily or mental infirmity or disease of any kind; or
2. **Suicide** - suicide, attempted suicide or self-inflicted injury while sane or insane; or
3. **War or Insurrection** - declared or undeclared war, or any act of war, riot or insurrection, or service in the armed forces of any country or international organization; or
4. **Intoxication** - any event which occurs while the concentration of alcohol in the *Insured Person's* blood exceeds 80 milligrams of alcohol in 100 millilitres of blood; or
5. **Drugs or Poison** - any voluntary ingestion of poison, toxic substances or non-toxic substances or drugs, sedatives or narcotics, whether illicit or prescribed, in such quantity that they become toxic, or voluntary inhalation of a gas; or
6. **Criminal Offence** - committing or attempting to commit a criminal offence, or committing or provoking an assault; or
7. **Medical Complications** - medical or surgical treatment or complications arising therefrom, except when required as a direct result of an *Accidental Bodily Injury*.

## PART 2 – Legal Assistance

This is not an insurance benefit. This is a service provided by *our Administrator*. Any payments made by *Our Administrator* will be charged to *Your Preferred Mastercard* card.

**You** and **Your** means the *Primary Cardholder, Spouse* and/or *Dependent Child*

### Coverage Eligibility

No need to use *Your Preferred Mastercard* card to be eligible for the following service.

### Coverage Period

The following service is available to *You* until such time as *Your* coverage is terminated in accordance with the “Termination of Coverage” provision set out in this Certificate.

If while travelling *You* require legal assistance, *You* can call the *Operations Centre* for referral to a local legal advisor and/or for assistance with arrangements for the posting of bail and the payment of legal fees, to a maximum of \$5,000, which will be charged to the *Account* (subject to credit availability).

## PART 3 – Trip Assistance

This is not an insurance benefit. This is a service provided by *Our Administrator*. Any payments made by *Our Administrator* will be charged to *Your Preferred Mastercard* card.

**You** and **Your** means the *Primary Cardholder, Spouse* and/or *Dependent Child*.

**Coverage Eligibility** No need to use *Your Preferred Mastercard* card to be eligible for the following services.

**Coverage Period** The following services are available to *You* until such time as *Your* coverage is terminated in accordance with the “Termination of Coverage” provision set out in this Certificate.

### 1. Emergency Cash Transfer

When *You* are travelling away from home, the *Operations Centre* will help *You* to obtain an emergency cash transfer which will be charged to the *Account* (subject to credit availability, to a maximum of \$5,000) or payment for such costs will be arranged, if reasonably possible, through family or friends if it cannot be charged to the *Account*.

### 2. Lost Document and Ticket Replacement

The *Operations Centre* will help *You* replace lost or stolen travel documents. The cost of

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obtaining replacement documents will be charged to the *Account* (subject to credit availability) or payment for such costs will be arranged, if reasonably possible, through family or friends if they cannot be charged to the *Account*.

### 3. Lost Baggage Assistance

The *Operations Centre* will help *You* locate or replace lost or stolen luggage and personal effects. The cost of obtaining replacement luggage and personal effects will be charged to the *Account* (subject to credit availability) or payment for such costs will be arranged, if reasonably possible, through family or friends if they cannot be charged to the *Account*.

### 4. Pre-Trip Information

*You* can call the *Operations Centre* to obtain information regarding passport and visa regulations and vaccination and inoculation requirements for the country to which *You* are travelling.

### 5. Operations Centre Assistance Services

The services described above are to be provided by the *Operations Centre* and are assistance services only, not insurance benefits. Assistance services may not be available in countries where there is political unrest or which *Operations Centre* determines to be unsafe. In order to access these services from anywhere in Canada or U.S. call toll free 1-866-520-8827. From elsewhere call collect 1-519-742-9356.

### General Provisions

Unless otherwise expressly provided herein or in the Policy, the following general provisions apply to the benefits described in this Guide to Coverage:

**Claims:** Immediately after learning of a loss, or an occurrence which may lead to a loss under any of these benefits, notify the *Operations Centre* by calling toll free 1-866-520-8827 within Canada and the U.S., or by calling 1-519-742-9356 locally, or call collect from other countries.

*You* will then be sent a claim form.

**Claim Forms:** Within fifteen (15) days after the *Operations Centre* has received notice of claim, a claim form will be sent to the claimant. If the claimant does not receive the claim form, he or she will meet the requirements of this Certificate by sending to the *Operations Centre*: a) a written notice describing the cause of the claim; and b) satisfactory proof of loss as outlined in the Proof of Loss provisions, within the time limit set out for proof of loss.

**Notice of Claim:** Notice of Claim must be made to the *Operations Centre* within thirty (30) days of the date of the event for which benefits are being claimed. If this is not done, it must be shown that notice was sent as soon as reasonably possible.

**Currency:** All amounts stated in the Certificate are in Canadian currency unless otherwise indicated. If *You* have paid a covered expense, *You* will be reimbursed in Canadian currency at the prevailing rate of exchange on the date the service was provided.

**Due Diligence:** The *Insured Person* shall use diligence and do all things reasonable to avoid or diminish any loss of or damage to property protected by the Policy.

**False Claim:** If an *Insured Person* makes any claim knowing it to be false or fraudulent in any respect, coverage under this Certificate shall cease and there shall be no payment of any claim made under this Certificate or the Policy.

**Legal Action Limitation Period:** Every action or proceeding against the insurer for the recovery of insurance money payable under the contract is absolutely barred unless commenced within the time set out in the *Insurance Act* (for actions or proceedings governed by the laws of Alberta or British Columbia), *The Insurance Act* (for actions or proceedings governed by the laws

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of Manitoba), the *Limitations Act, 2002* (for actions or proceedings governed by the laws of Ontario), the *Civil Code of Quebec* (for actions or proceedings governed by the laws of Quebec), or another applicable legislation.

**Payment of Benefits:** Benefits payable under this Certificate will be paid within sixty (60) days of receipt of satisfactory proof of loss. This policy contains a provision removing or restricting the right of the group person insured to designate persons to whom or for whose benefit insurance money is to be payable.

**Physical Examination:** *We* have the right to investigate the circumstances of *Loss* and to require a medical examination; and in the event of death to require an autopsy if not prohibited by law.

**Proof of Loss:** *Your* completed claim form together with written proof of loss must be sent to the *Operations Centre* within ninety (90) days of the date a claim arises. Failure to give notice of claim or furnish proof of loss within the time prescribed does not invalidate the claim if it is shown that it was not reasonably possible to give notice or furnish proof within the time so prescribed and if the notice or proof is given or furnished as soon as reasonably possible, and in no event later than one (1) year from the date of the event for which benefits are being claimed.

**Subrogation:** Following *Our* payment of an *Insured Person's* claim for loss or damage, *We* shall be subrogated to the extent of the cost of such payment, to all of the rights and remedies of the *Insured Person* against any party in respect of such loss or damage, and shall be entitled at *Our* own expense to sue in the name of the *Insured Person*. The *Insured Person* shall give *Us* all such assistance as *We* may reasonably require to secure *Our* rights and remedies, including the execution of all documents necessary to enable *Us* to bring suit in the name of the *Insured Person*.

**Termination of Coverage:** An *Insured Person's* coverage will automatically terminate on the earliest of the following, the date when: an *Insured Person* for any reason ceases to fall within the description of *Insured Person*; the Policy is terminated as provided in the Policy; the Bank receives notice that the *Primary Cardholder* wishes to cancel the *Account*; the *Primary Cardholder's Account* ceases to be in *Good Standing*. No losses incurred after such termination date will be paid.

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