United States Fire Insurance Company  
Administrative Office: 5 Christopher Way, Eatontown, NJ 07724

TRAVEL PROTECTION INSURANCE CERTIFICATE

This Certificate describes the group travel insurance benefits underwritten by United State Fire Insurance Company, herein referred to as the “Company” or as “We”, “Us” and “Our”. Please refer to the Schedule of Benefits, which provides the Insured, also referred to as “You” or “Your”, with specific information about the program You purchased. Defined terms are capitalized and their meanings are listed in the General Definitions section.

PLEASE READ THIS DOCUMENT CAREFULLY FOR FULL DETAILS

This document is a legal contract issued in consideration of Your enrollment and payment of the premium due collected by Us or Our authorized representative. If there are any conflicts between the contents of this document and the policy (form series T7000GBP), the policy will govern in all cases.

Signed for United States Fire Insurance Company By:

Marc J. Adee  
Chairman and CEO

James Kraus  
Secretary
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SECTION I COVERAGE PROVISIONS

Who Is Eligible For Coverage:
A person who is booked to travel on a Trip and pays the required premium is covered under this certificate. Eligibility for purchase of this Certificate will be determined at time of claim. If it is determined that You or the Trip is not eligible for coverage, any claim for benefits will be denied and Your premium will be refunded.

SECTION II WHEN COVERAGE BEGINS AND ENDS

When Coverage Begins:
This is Your Effective Date and time for Trip Cancellation:
Coverage begins:
   at 12:01 a.m. at Your location on the day after the date We or Our authorized representative receive the required premium to cover Your Trip.

This is Your Effective Date and time for Trip Interruption:
Coverage begins when You depart on his/her first scheduled Travel Arrangement (or if You must use an alternate Travel Arrangement after Your Scheduled Departure Date to reach Your Scheduled Destination, on the Scheduled Departure Date) for Your Trip.

When Coverage Ends:
Trip Cancellation coverage(s) automatically end on the earlier of:
   1. the date and time You depart on Your Trip;
   2. the date and time You cancel Your Trip.

All Other Coverages: Your coverage automatically ends on the earlier/est of:
   1. the date You complete Your Trip;
   2. the Scheduled Return Date;
   3. Your arrival at the Return Destination on a round Trip, or Your Scheduled Destination on a one-way Trip;
   4. cancellation of Your Trip covered by this certificate.

SECTION III EXTENSION OF COVERAGE

Automatic Extension of Coverage
All coverages will be extended if Your entire Trip is covered by this certificate and Your return is delayed due to unavoidable circumstances beyond Your control. This extension of coverage will end on the earlier of the date You reach Your originally scheduled Return Destination or 7 days after the originally Scheduled Return Date.

SECTION IV COVERAGES

TRIP CANCELLATION
If You cancel Your Trip prior to the Scheduled Departure Date, We will reimburse You, up to the Maximum Benefit Amount shown in the Schedule of Benefits, for unused, forfeited, prepaid non-refundable Payments or Deposits for the Travel Arrangements You purchased for Your Trip, provided the cancellation occurs while coverage is in effect for You and is due to any of the following covered Unforeseen reasons, as defined:
   1. Your, a Family Member’s, or a Traveling Companion’s death that occurs before departure on Your Trip; or
   2. Your, a Family Member’s, or a Traveling Companion’s Sickness or Injury, that:
      a. occurs before departure on Your Trip;
      b. is examined and treated by a Physician prior to cancellation; and
      c. as certified by a Physician, results in medical restrictions so disabling as to cause You to cancel Your Trip;
   3. You or Your Traveling Companion must cancel Your Trip due to Other Covered Events as defined, provided such circumstances occur while coverage is in effect:

Other Covered Events means:
   1. You or Your Traveling Companion must cancel Your Trip due to a normal pregnancy or childbirth;
2. You or Your Traveling Companion is directly involved in a traffic accident, while en route to Your Scheduled Trip Departure City. The traffic accident must be documented by a police report;

3. an unannounced Strike results in a complete cessation of services for at least 18 consecutive hours of a Common Carrier on which You are scheduled to travel which prevents You from reaching Your Scheduled Destination;

4. Inclement Weather that causes a: complete cessation of services for at least 18 consecutive hours of a Common Carrier on which You are scheduled to travel;

5. You or Your Traveling Companion’s Primary Residence or Scheduled Destination are made Uninhabitable and remain Uninhabitable during Your Trip within 30 days of Your Scheduled Departure Date by a Natural Disaster, or vandalism or burglary;

   Claims are not payable if a hurricane is foreseeable prior the Effective Date for Trip Cancellation. A hurricane is foreseeable on the date it becomes a named storm. We will only pay the benefits for losses occurring within 30 days after the event renders Your Scheduled Destination Uninhabitable or inaccessible.

6. You or Your Traveling Companion is hijacked or Quarantined;

7. You or Your Traveling Companion is subpoenaed, or served with a court order, or required to serve on a jury, or required to appear as a witness in a legal action, provided You or You Traveling Companion are not: 1) a party to the legal action; except appearing in a law enforcement capacity;

8. You or Your Traveling Companion is called to active military duty either to serve or to provide aid or relief in the event of a Natural Disaster other than war;

9. a Terrorist Incident occurs before Your Trip:
   a. within 30 days of Your Scheduled Departure Date in a city listed on the scheduled itinerary of Your Trip.

   Provided Your Travel Supplier (if applicable) did not offer a substitute itinerary.

10. You or Your Traveling Companion is the victim of a Felonious Assault within 10 days prior to the Scheduled Departure Date;

11. a travel alert or travel warning for levels 3 and higher for cities listed on Your itinerary after Your Effective Date for Trip Cancellation, to a destination specifically listed on Your Itinerary. The travel alert/warning, etc. must occur within 30 days of the scheduled Departure Date.

   For up-to-date information refer to the U.S. State Department website at https://travel.state.gov/content/travel/en/traveladvisories/traveladvisories.html

12. You or Your Traveling Companion are a student (or are a parent of a student) or are employed either as a full-time teacher or other full-time employee at an elementary, middle or high school and are required to attend/cover an extended school year that falls during or beyond the Scheduled Departure Date. Notice of the extended school year must be provided after the Trip Cancellation Effective Date. School extensions due to extra-curricular, athletic events or failing grades are not covered;

13. You or Your Traveling Companion are required to take an academic examination on a date that has been scheduled after the Trip Cancellation Effective Date, and the date falls during Your Trip.

The maximum payable under this Trip Cancellation Benefit is the Maximum Benefit Amount shown in the confirmation of coverage.

You must report all cancellations to the Travel Supplier within 72 hours of the event causing the need to cancel. If the event delays the reporting of the cancellation beyond the 72 hours, You should report the event as soon as possible.

We do not cover increased amounts of Published Penalties and unused, non-refundable prepaid Payments or Deposits that result from all other delays or reporting beyond 72 hours.

These benefit(s) will not duplicate any other benefits payable under the certificate or any coverage(s) attached to the certificate.

**TRIP INTERRUPTION**

If You must start Your Trip late or are unable to complete Your Trip, We will reimburse You, up to the Maximum Benefit Amount shown in the Schedule of Benefits, for the unused, forfeited, prepaid non-refundable Payments or Deposits paid for the land or water Travel Arrangements You purchased for Your Trip plus the Additional Transportation Cost paid to either:
a) join Your Trip if You must depart after the Scheduled Departure Date or travel via alternate travel arrangements; or
b) rejoin Your Trip from the point where You interrupted Your Trip to the next Scheduled Destination; or
c) transport You to Your originally scheduled Return Destination of Your Trip;

Trip Interruption must occur while coverage is in effect for You due to any of the following covered Unforeseen reasons, as defined:

1. Your, a Family Member’s, or Your Traveling Companion’s death, which occurs while You are on Your Trip; or
2. Your, a Family Member’s, or Your Traveling Companion’s Sickness or Injury, that:
   a) occurs while You are on Your Trip;
   b) is examined and treated by a Physician prior to the time of interruption; and
   c) as certified by a Physician, results in medical restrictions so disabling as to prevent Your continued participation on Your Trip;
3. You or Your Traveling Companion must interrupt Your Trip due to Other Covered Events as defined, provided such circumstances occur while coverage is in effect:

Other Covered Events means:
1. You or Your Traveling Companion must interrupt Your Trip due to a normal pregnancy or childbirth;
2. an unannounced Strike resulting in complete cessation of travel services for at least 18 consecutive hours of the Common Carrier on which You are scheduled to travel which prevents You from reaching Your Scheduled Destination;
3. You or Your Traveling Companion is directly involved in a traffic accident, while en route to Your Scheduled Destination. The traffic accident must be documented by a police report;
4. Inclement Weather that causes a complete cessation of services of a Common Carrier on which You are scheduled to travel which prevents You from reaching Your Scheduled Destination;
5. You or Your Traveling Companion’s Primary Residence or Scheduled Destination are made Uninhabitable and remains Uninhabitable during Your Trip within 30 days of the Scheduled Departure Date by a Natural Disaster, or vandalism or burglary;

   Claims are not payable if a hurricane is foreseeable prior to Your Effective Date for Trip Interruption. A hurricane is foreseeable on the date it becomes a named storm. We will only pay the benefits for losses occurring within 30 days after the event renders Your Scheduled Destination Uninhabitable or inaccessible;
6. You or Your Traveling Companion is hijacked or Quarantined;
7. You or Your Traveling Companion is subpoenaed, or served with a court order, or required to serve on a jury, or required to appear as a witness in a legal action, provided You or Your Traveling Companion is not: 1) a party to the legal action; except appearing in a law enforcement capacity;
8. You or Your Traveling Companion are called to active military duty either to serve or to provide aid or relief in the event of a Natural Disaster other than war;
9. a Terrorist Incident that occurs during Your Trip:
   a. in a city listed on the scheduled itinerary of Your Trip.

    provided Your Travel Supplier (if applicable) did not offer a substitute itinerary.
10. You or Your Traveling Companion are the victim of a Felonious Assault while on Your Trip;
11. A travel alert or travel warning for levels 3 and higher is issued, for cities listed on Your itinerary after the Effective Date of Your Trip Interruption Coverage, to a Scheduled Destination specifically listed on Your Itinerary. The travel alert/warning, etc. must occur during Your scheduled Trip.

   For up-to-date information refer to the U.S. State Department website at https://travel.state.gov/content/travel/en/traveladvisories/traveladvisories.html
12. You or Your Traveling Companion is required to take an academic examination on a date that has been scheduled after the Effective Date of Trip Cancellation coverage, and the date falls during Your Trip.

In no event shall the amount reimbursed for Trip Interruption exceed the lesser of the amount You prepaid for Your Trip or the Maximum Benefit Amount shown in the Schedule of Benefits.
These benefit(s) will not duplicate any other benefits payable under the certificate or any coverage(s) attached to the certificate.

SECTION V GENERAL DEFINITIONS

**Accident** means a sudden, unexpected unusual specific event that occurs at an identifiable time and place, and shall also include exposure resulting from a mishap to a conveyance in which You are traveling.

**Accommodation(s)** means any establishment used for the purposes of temporary, overnight lodging such as apartment, condominium, or other vacation or timeshare residential unit(s).

**Additional Transportation Cost** means the actual cost incurred for one-way economy transportation (or for the original class of fare, if the original tickets were for a higher class of fare) by Common Carrier by the most direct route, less any refunds paid or payable, for Your unused original tickets.

**Children/Child** means a person:

a. under age of 17 and primarily dependent on You for support and maintenance; or

b. who is at least age seventeen (17) but less than age twenty-six (26) and primarily dependent on You for support and maintenance.

The age limit does not apply to a child who is incapable of self-sustaining employment by reason of mental or physical incapacity.

**Common Carrier** means an air, land, sea conveyance operated under a license for the transportation of passengers for hire.

**Domestic Partner** means an opposite or a same-sex partner who is at least eighteen (18) years of age and has met all of the following requirements for at least 6 months:

a) resides with You;

b) shares financial assets and obligations with You;

c) is not related by blood or adoption to You to a degree of closeness that would prohibit a legal marriage;

d) neither You nor domestic partner is married to anyone else, nor has any other domestic partner.

**Effective Date** means the date and time Your coverage begins, as indicated in When Coverage Begins and Ends section of this certificate.

**Elective Treatment And Procedures** means any medical treatment or surgical procedure that is not medically necessary including any service, treatment, or supplies that are deemed by the federal, or a state or local government authority, or by Us to be research or experimental or that is not recognized as a generally accepted medical practice.

**Experimental or Investigative** means treatments, devices or prescription medications, which are recommended by a Physician, but are not considered by the U.S. medical community as a whole, to be safe and effective for the condition for which the treatments, devices or prescription medications are being used. This includes any treatments, procedures, facilities, equipment, drugs, drug usage, devices, or supplies not recognized as accepted medical practice, and any of those items requiring federal or other U.S. governmental agency approval not received at the time services are rendered.

**Family Member** means the following relatives of You or Your Traveling Companion:

a) Spouse, Domestic Partner;

b) children, children-in-law, step-children, foster children, ward or legal ward;

c) siblings, siblings-in-law, step-siblings;

d) parents, parents-in-law, step-parents, legal guardians, or Guardians;

e) grandparents, grandchildren;

f) aunts or uncles;

g) nieces or nephews.

**Felonious Assault** means an act of violence against You or Your Traveling Companion, which requires medical treatment in a Hospital, and is substantiated by a police report.
Home Country means the country or territory of residence or Your citizenship as shown on Your passport. If You have dual citizenship, for the purposes of this benefit, Your Home Country is the country of the passport You uses to enter the Host Country, while covered under this certificate.

Hospital means a facility that:

a. is operated according to law for the care and treatment of sick or injured people;

b. is licensed or recognized as a general hospital by the proper authority of the state in which it is located;

c. is recognized as a general hospital by the Joint Commission on the Accreditation of Hospitals.

A Hospital does not include:

1. a nursing, convalescent or geriatric unit of a Hospital when a patient is confined mainly to receive nursing care;

2. a facility which treats drug, marijuana or alcoholism additions;

3. a facility that is, other than incidentally, a clinic, a rest home, nursing home, convalescent home, home health care, or home for the aged, nor does it include any ward, room, wing or other section of the Hospital that is used for such purposes.

Host Country means a country or territory You are visiting or in which You are living which is not Your Home Country, other than an excluded country, while covered under this certificate.

Inclement Weather means any severe weather condition that delays the scheduled arrival or departure of a Common Carrier.

Individual Coverage Term means the period of time beginning when You have been enrolled for coverage under the certificate for which the required premium has been paid and ending on the date insurance coverage ends as specified in the When Coverage Begins and Ends section.

Injury(ies)/Injured means a bodily injury caused by an Accident occurring while Your coverage under this certificate is in force and resulting directly and independently of all other causes of loss covered by this certificate. Injury must not be caused by, or result from, Sickness. The injury(ies) requires examination and treatment and must be verified by a Physician.

Insured means:

the person that is scheduled to participate on a Trip; for whom any required enrollment has been completed and the required premium has been paid.

Medically Necessary means that a treatment, service, or supply:

a) is essential for diagnosis, treatment, or care of the Injury or Sickness for which it is prescribed or performed;

b) meets generally accepted standards of medical practice;

c) is ordered by a Physician or licensed Veterinarian and performed under his or her care, supervision, or order; or

d) is not used for the convenience of You, Physician, other providers, or any other person.

Natural Disaster means a flood, tsunami, cyclone, hurricane, tornado, earthquake, mudslide, avalanche, landslide, volcanic eruption, sandstorm, sinkhole, named winter storm, severe hail storm, fire, wildfire or blizzard; all of which are due to natural causes.

Payments or Deposits means

the cash, check, or credit card amounts actually paid for Your Trip. Certificates, vouchers, discounts and/or credits applied (in part or in full) towards the cost of Your Travel Arrangements are not Payments or Deposits as defined herein.

Physician means a licensed practitioner of medical services acting within the scope of his/her license in the jurisdiction where the services are rendered. The treating Physician cannot be You, a Traveling Companion, or a Family Member.

Pre-Existing Medical Condition means an illness, disease, or other condition during the 60-day period immediately prior to the date Your coverage is effective for which You or Your Traveling Companion, or Family Member scheduled or booked to travel with You:

1) received or received a recommendation for a test, examination, or medical treatment for a condition which first manifested itself, worsened or became acute, or had symptoms which would have prompted a reasonable person to seek diagnosis, care or treatment; or
2) took or received a prescription for drugs or medicine. Item (2) of this definition does not apply to a condition which is treated or controlled solely through the taking of prescription drugs or medicine and remains treated or controlled without any adjustment or change in the required prescription throughout the 60-day period before Your coverage is effective under Your certificate.

3) required a change in prescribed medication. Change in prescribed medication means the dosage or frequency of a medication has been reduced, increased, stopped and/or new medications have been prescribed due to the worsening of an underlying condition that is being treated with the medication, unless the change is:
   a) between a brand name and a generic medication with comparable dosage; or
   b) an adjustment to insulin or anti-coagulant dosage.

**Primary Residence** means Your fixed, permanent and main home for legal and tax purposes.

**Quarantined** means You or Your Traveling Companion is forced into strict medical isolation by a recognized government authority, their authorized deputies, medical examiners or Physician to prevent the spread of the disease due to You or Your Traveling Companion either having, or being suspected of having an contagious disease, infection or contamination while traveling outside of his/her country of Primary Residence.

**Return Destination** means Your final destination as shown in the itinerary or other travel documents and the place to which You expect to return from Your Trip.

**Scheduled Departure Date** means the date on which You are originally scheduled to leave on Your Trip. This date is specified in the itinerary or other travel documents.

**Scheduled Destination** means as shown in the itinerary or other travel documents where You expect to travel on Your Trip other than Return Destination.

**Scheduled Return Date** means the date on which You are scheduled to return to the point where Your Trip started or to a different specified Return Destination.

**Scheduled Departure City** means the city from which You are originally scheduled to depart on the Trip.

**Sickness** means an illness or disease of the body, that commences while Your coverage is in effect and requires examination, diagnosis and treatment by a Physician.

An illness or disease of the body that first manifests itself and then worsens or becomes acute prior to the Effective Date of Your coverage is not a Sickness as defined herein and is not covered by the certificate.

**Spouse** means Your lawful spouse, if not legally separated or divorced. For the purposes of this certificate, the term spouse includes civil union partner whenever used.

**Strike** means a labor disagreement resulting in a stoppage of work which:
   a) is unannounced and unpublished at time Your certificate is purchased;
   b) is organized, and legally sanctioned by a labor union or other organized association of workers, in a trade or profession, formed to protect and further their rights and interests; and
   c) interferes with the normal departure and arrival of a Common Carrier.

**Terrorist Incident** means an act of violence by any person acting on behalf of or in connection with any organization which is generally recognized as having the intent of overthrow or influence the control of any government or an act of violence committed by a Foreign Terrorist Organization (designated or recognized as such by the US State Department) that results in property damage, Injury or loss of life.

**Third Party(ies)** means any person, corporation or other entity (except You, Rental Property and Us).

**Travel Arrangements** means: (a) transportation; (b) Accommodations; and (c) other specified services arranged for Your Trip.

Air arrangements covered by this definition also include any direct round trip air flights booked by others, to and from the Scheduled Trip departure and return cities, provided the dates of travel for the air flights are within 7 total days of the scheduled Trip dates.
**Travel Assistance Services Provider** means the Assistance Company as listed within the Description of Coverage.

**Traveling Companion** means a person or persons whose name(s) appear(s) with Yours on the same Travel Arrangements and who, during Your Trip, will accompany You. A group or tour organizer, sponsor or leader is not a Traveling Companion as defined, unless sharing accommodations in the same room, cabin, condominium unit, apartment unit or other lodging with You.

**Travel Supplier** means any entity or organization that coordinates or supplies Travel Arrangements for You.

**Trip** means a scheduled Trip for which coverage is elected and the premium paid and all Travel Arrangements are arranged prior to the Scheduled Departure Date.

**Unforeseen** means not known, anticipated or reasonably expected, and occurring after the effective date of the benefit under which the claim is being made.

**Uninhabitable** means:
1. the building structure itself is unstable and there is a risk of collapse in whole or in part; or
2. there is exterior or structural damage allowing elemental intrusion, such as rain, wind, hail or flood; or
3. immediate safety hazards have yet to be cleared, such as debris or downed electrical lines; or
4. the property is without electric gas, sewer service or water; or
5. local government authorities have issued a mandatory evacuation; or
6. the destination is inaccessible by the mode of transportation as shown on the travel documents or itinerary.

### SECTION VI EXCLUSIONS AND LIMITATIONS

Unless otherwise shown below, these exclusions apply to You.

**The following exclusion(s) appl(y)(ies) to Trip Cancellation and Trip Interruption:**

We will not pay for any loss or expense caused due to, arising or resulting from:
1. a Pre-Existing Medical Condition, as defined in the certificate.

**In addition to any applicable benefit-specific exclusion, the following general exclusions apply to all losses and all benefits.**

We will not pay for any loss or expense caused due to, arising or resulting from:
1. suicide, attempted suicide or any intentionally self-inflicted injury of You, a Traveling Companion or, Family Member booked and scheduled to travel with You, while sane or insane;
2. being under the influence of drugs or narcotics, unless administered upon the advice of a Physician as prescribed;
3. war or act of war, including invasion, acts of foreign enemies, hostilities between nations (whether declared or undeclared), or civil war;
4. participation in a Civil Disorder or Riot, or insurrection;
5. the commission of or attempt to commit a felony or being engaged in an illegal occupation by You, a Traveling Companion or Family Member;
6. piloting or learning to pilot or acting as a member of the crew of any aircraft.
SECTION VII CLAIMS PROCEDURES

Your duties in the event a loss:
For Trip Cancellation and Trip Interruption You must:

Immediately, or as soon as possible, call Your Travel Supplier and the program administrator (see Where to Report a Claim) to report Your cancellation or interruption to avoid non-covered charges due to late reporting.

If You are prevented from taking Your Trip as scheduled or must interrupt Your Trip due to Sickness or Injury, You should obtain medical care immediately. We require an examination and treatment by a Physician prior to cancellation or interruption. Provide all unused transportation tickets, official receipts, etc.

SECTION VIII HOW TO FILE A CLAIM

Notice of Claim: Notice of claim must be reported to Us or Our authorized representative within 20 days after a loss occurs, or as soon as is reasonably possible. You or someone on Your behalf may give the notice. The notice should be given to Us or Our authorized representative and should include sufficient information to identify You.

Claim Forms: When notice of claim is received by Us or Our authorized representative, forms for filing proof of loss will be furnished. If these forms are not sent within 15 days, the proof of loss requirements can be met by You sending Us a written statement of what happened. This statement must be received within the time given for filing Proof of Loss.

Proof of Loss: Proof of loss must be provided within {90} days after the date of the loss or as soon as is reasonably possible. Failure to furnish such proof within provided period will not invalidate nor reduce any claim if it shall be shown not to have been reasonably possible to furnish such proof during that time. Proof of Loss must, however, be furnished no later than 12 months from the time it is otherwise required, except in the absence of legal capacity.

All claims require You to provide the company with the following: a Trip invoice, itinerary or confirmation showing details of Your Trip (dates of travel, destination, etc.); and any other information reasonably required to prove the loss.

Payment of Claims: Benefits for loss of life will be paid to Your designated beneficiary. If a beneficiary is not otherwise designated by You, benefits for loss of life will be paid to the first of the following surviving preference beneficiaries:

1. Your spouse;
2. Your child or children jointly;
3. Your parents jointly if both are living or the surviving parent if only one survives;
4. Your brothers and sisters jointly; or
5. Your estate.

All other benefits will be paid directly to You, unless otherwise directed. Any accrued benefits unpaid at Your death will be paid to Your estate. If You have assigned Your benefits, we will honor the assignment if a signed copy has been filed with us. We are not responsible for the validity of any assignment.

All or a portion of all benefits provided by the certificate may, at Our option, be paid directly to the provider of the service(s) to You. All benefits not paid to the provider will be paid to You.

If any benefit is payable to: (a) an Insured who is a minor or otherwise not able to give a valid release; or (b) Your estate, We may pay any amount due under the certificate to Your beneficiary or any relative whom We find entitled to the payment. Any payment made in good faith shall fully discharge Us to any party to the extent of such payment.

Benefit to Bailee: This insurance will in no way inure directly or indirectly to the benefit of any carrier or other bailee.

Recovery: To the extent We pay for a loss suffered by You, We will be assigned the rights and remedies You had relating to the loss. You will be made whole before We begin recovery. Our right to be reimbursed has priority over Your right to be made whole. This means that Our right of recovery applies even if Your entire loss has not been compensated. However, the amount of Our recovery will be reduced by a proper share of Your legal fees and Your expenses needed to obtain the refund.

You must help Us preserve its rights against those responsible for its loss. This may involve signing any papers and taking any other steps We may reasonably require. When You have been paid benefits under this certificate but also
recovers from another certificate, the amount recovered from the other certificate shall be held in trust for Us by You and reimbursed to Us to the extent of Our payment.

As a condition to receiving the applicable benefits listed above, You agree, except as may be limited or prohibited by applicable law, to reimburse Us for any such benefits paid to or on behalf of You, if such benefits are recovered, in any form, from any Third Party or coverage.

We will not pay or be responsible, without its written consent, for any fees or costs associated with the pursuit of a claim, cause of action or right by or on behalf of an Insured or such other person against any Third Party or coverage.

Coverage as used in this Recovery section, means any other fund or insurance certificate except coverage provided under this certificate.

SECTION IX GENERAL PROVISIONS

The Contract: The entire contract is made up of the Policy and amendments if applicable, the Policyholder’s Application, a copy of which is attached and the Certificates of Insurance. This Policy may be changed, renewed, or ended without notice to or consent of any person with a beneficial interest in this Policy.

Certificates: The Company will issue Certificates to the Policyholder for their Insureds. Such Certificates will describe each person’s benefits and rights under this Policy.

Beneficiary Designation and Change: Your beneficiary(ies) is (are) the person(s) designated by and on file with Us or Our administrator. You are over the age of majority and legally competent may change Your beneficiary designation at any time, unless an irrevocable designation has been made, without the consent of the designated beneficiary(ies), by providing Us or Our administrator with a written request for change. When the request is received, whether Your is then living or not, the change of beneficiary will relate back to and take effect as of the date of execution of the written request, but without prejudice to Us on account of any payment made by it prior to receipt of the request.

Clerical Error: We or Our authorized representative may make a clerical error in keeping the data. If so, when the error is found, the (premium) and/or benefits will be adjusted according to the correct data. An error will not end insurance validly in force, nor will it continue insurance validly ended.

Concealment and Misrepresentation: The entire coverage will be void, if before, during or after a loss, any material fact or circumstance relating to this insurance has been concealed or misrepresented.

Conformity with Statute: Terms of this certificate that conflict with the laws of the state where it is delivered are amended to conform to such laws.

Data Needed: We or Our authorized representative will keep a record of all the data needed to compute (premium) and carry out the terms of this certificate. We may examine such data at any reasonable time.

Economic or Trade Sanctions: Any payments under this certificate will only be made in full compliance with all United States of America economic or trade sanction laws or regulations, including, but not limited to, sanctions, laws, and regulations administered and enforced by the U.S. Treasury Department’s Office of Foreign Assets Control (“OFAC”). Therefore, any expenses incurred or claims made involving travel that is in violation of such sanctions, laws and regulations will not be covered under this certificate. For more information, You may consult the OFAC internet website at www.treas.gov/offices/enforcement/ofac/.

Entire Contract: Changes: This certificate and any other attachments are the entire contract of insurance. No agent or other person may change it in any way. Only an officer of the Company can approve a change. Any such change must be shown in this certificate or its attachments.

Legal Actions Against Us: All certificate terms will be interpreted under the laws of the state in which the certificate was issued. No legal action may be brought to recover on the certificate within 60 days after written Proof of Loss has been furnished. No legal action for a claim may be brought against Us after 3 years from the time written Proof of Loss is required to be furnished.

Limit on Agent’s Authority: No agent may change or waive any provisions of this certificate. Our office must approve
any change or waiver in writing.

**Misstatement of Age:** If premiums are based on age and You have misstated Your age, there will be a fair adjustment of premiums based on Your true age. If the benefits for which You are insured are based on age and You have misstated Your age, there will be an adjustment of said benefit based on Your true age. We may require satisfactory proof of age before paying any claim.

**Other Insurance with Us:** You may be covered under only one travel certificate with Us for each Trip. If You are covered under more than one such certificate, You may select the coverage that is to remain in effect. In the event of death, the beneficiary or estate will make the selection. Premium paid (less claims paid) will be refunded for the duplicate coverage that does not remain in effect.

**Subrogation:** If We have made a payment for a loss under this coverage, and the person to or for whom payment was made has a right to recover damages from the Third Party responsible for the loss, We will be subrogated to that right. You shall help Us exercise Our rights in any reasonable way that We may request; nor do anything after the loss to prejudice Our rights; and in the event You recover damages from the Third Party responsible for the loss, You will hold the proceeds of the recovery for Us in trust and reimburse Us to the extent of Our previous payment for the loss. Our right of subrogation applies even if Your entire loss has not been compensated.

**Physician Examination and Autopsy:** We, at Our expense, may have You examined when and as often as is reasonable while the claim is pending. We may have an autopsy done (at Our expense) where it is not forbidden by law.

**Termination of This Certificate:** Termination of the certificate will not affect a claim for loss, which occurs after the premium is payed and while Your certificate is in force.

**Transfer of Coverage:** Coverage under this certificate cannot be transferred to anyone else.