

Information for persons insured under collective insurance

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Terms and Conditions of Travel Insurance for charge cards and credit cards of Swisscard AECS GmbH

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Information for persons insured under collective insurance

The following information for persons insured under collective insurance provides an overview of the identity of the insurers and the material content of the insurance contract (Article 3 (3) of the Swiss Federal Law on Insurance Contracts [Bundesgesetz über den Versicherungsvertrag, hereinafter "VVG"]). The specific rights and obligations of the insured persons are derived from the Terms and Conditions of Insurance (hereinafter "CI"), any application forms, and from the applicable provisions of law (VVG).

1. Contracting parties

Swisscard AECS GmbH as the issuer (hereinafter "Issuer") of charge cards and credit cards (hereinafter "Card(s)") has concluded with the following insurer a collective agreement relating to insurance benefits (hereinafter "Collective Insurance Agreement") that cardholders can benefit from by optionally registering with the Collective Insurance Agreement. Based on the registration with the Collective Insurance Agreement, the insured persons (see Section 2) are granted specific claims to benefits (see Section IV. A–D of the Special Terms and Conditions of Insurance) vis-à-vis the Insurer, but not vis-à-vis the Issuer.

The Insurer and risk bearer is:

EUROPEAN Travel Insurance Co. Ltd (hereinafter "the Insurer"), a stock corporation under Swiss law with registered offices at St. Alban-Anlage 56, P.O. Box, 4002 Basel. The Insurer and the Issuer can delegate tasks to service provision companies pursuant to the Terms and Conditions of Insurance.

2. Insured persons

The insured persons are derived from the definition in the Terms and Conditions of Insurance (see Section I. C. of the CI).

3. Insured risks, scope of insurance cover

The insured risks and the scope of insurance cover (including exclusions from insurance cover) are derived from the Terms and Conditions of Insurance, and particularly from the summary of insurance benefits (see Section II. of the CI) in conjunction with the insurance certificate. The insurance cover exists regardless of whether the travel in question was paid using the Card.

4. How is the premium calculated?

The premium will be explicitly communicated as part of the process of registering with the Collective Insurance Agreement.

5. What are the duties and obligations of the insured persons?

The duties and obligations are listed in detail in the Terms and Conditions of Insurance as well as in the VVG.

The following are material duties of the insured persons, for example:

- If a claim event occurs, it must be reported to the Insurer without undue delay.
- The insured persons must cooperate in the Insurers' investigations, e.g., in case of a claim, and must submit all necessary documentation (duty of cooperation).
- In case of a claim, reasonable steps to reduce and resolve the damage must be taken (duty to reduce damage).
- The principal cardholder is obligated to inform the other insured persons (particularly the additional cardholders) regarding the significant points of the insurance cover and the duties in case of an insured event, as well as the circumstance that these Terms and Conditions of Insurance can be obtained at any time from Swisscard AECS GmbH, Neugasse 18, CH-8810 Horgen, Switzerland, or examined on the Internet at www.swisscard.ch

6. Term and termination of the insurance

The insurance cover shall normally be in force as long as the underlying card relationship and the registration with the Collective Insurance Agreement are effective. Special provisions on the term of insurance cover (depending on covered risk) can be found in the Terms and Conditions of Insurance.

7. Change in scope of cover or premiums

The Insurer and the Issuer can adjust premiums and contract terms. The details of the adjustment process can be found in the Terms and Conditions of Insurance (see Section III. Point 6).

8. Information on the processing of person-related data

The Issuer and Insurer process data that result from the contract documentation or contract processing and use these data particularly for calculating the premium, for risk evaluation, for processing claims, and for statistical analyses. In addition, the Issuer is authorized to use data particularly from the contract documentation and the contract processing for marketing purposes. The data are processed, particularly obtained, stored, used, revised, disclosed, archived, and destroyed, physically or electronically in accordance with legal regulations. The Issuer and the Insurer can exchange data for processing to the necessary extent with third parties in Switzerland or abroad involved in contract processing, co-insurers and reinsurers, service providers, and domestic and foreign companies belonging to the Insurer. In addition, the Issuer and the Insurer can obtain relevant information from government offices and other third parties, particularly with regard to the claims history. This applies independently from the creation of the contract. The insured person has the right to demand from the Issuer as well as the Insurer the information provided for by law regarding the processing of the data relating to the insured person.

Terms and Conditions of Travel Insurance for charge cards and credit cards of Swisscard AECS GmbH

I. Structure of the Terms and Conditions / Introduction / Definitions

A. Structure of the Terms and Conditions

The Terms and Conditions of Insurance are structured as follows:

I. Structure of the Terms and Conditions / Introduction / Definitions

II. Summary of Insurance Benefits

III. General Terms and Conditions of Insurance (GCI)

IV. Special Terms and Conditions of Insurance (SCI)

The benefits in case of an insured event are specified conclusively and as a supplement to the General and Special Terms and Conditions of Insurance in the summary of insurance benefits. In case of a conflict, the summary of insurance benefits takes precedence.

The General Terms and Conditions of Insurance shall always apply when the Special Terms and Conditions of Insurance do not provide otherwise. In case of conflict, the Special Terms and Conditions of Insurance shall apply.

B. Introduction

The Issuer has concluded a Collective Insurance Agreement with the Insurer that grants certain claims to benefits vis-à-vis the Insurer, but not vis-à-vis the Issuer and/or third parties commissioned by the Issuer for processing the contract relationship, to cardholders and other insured persons upon registration with the Collective Insurance Agreement.

The principal cardholder is obligated to inform the other insured persons (particularly the additional cardholders) as necessary regarding the significant points of the insurance cover and the duties in case of an insured event, as well as the circumstance that these Terms and Conditions of Insurance can be obtained at any time from Swisscard AECS GmbH, Neugasse 18, CH-8810 Horgen, Switzerland, or examined on the Internet at www.swisscard.ch

Insured events shall be reported directly to the Insurer immediately upon obtaining knowledge of the claim, because otherwise claims to benefits may be lost.

C. Definitions

To facilitate reading, only the masculine form is used in this document.

The terms used in these Terms and Conditions of Insurance have the following meaning:

Abroad

Abroad shall be deemed to be not Switzerland and not the country in which the insured person maintains a permanent residence.

Accident

An accident is the sudden, unintended damaging effect of an unusual external factor on the human body that leads to an impairment of physical, mental, or psychological health or to death.

Additional Cardholder

The person to whom the Issuer has issued an additional card upon request of the principal cardholder.

Advances

Payments that the assistance service provider makes without them being reimbursed by an insurer, and which the insured person must repay to the assistance service provider within one month after the advance or return to the country of permanent residence.

Cancellation Costs

If the traveler withdraws from the contract, the travel organizer loses its claim to the agreed-upon travel price. However, the travel organizer can demand reasonable compensation. The amount of the compensation depends on the travel price less the value of the expenses saved by the travel organizer as well as what the travel provider can earn by other use of the travel services.

Card

A charge card and/or credit card from the Issuer.

Card Cover

The insurance benefits of the Travel Insurance linked to the Card, which can be included by optional registration with the Collective Insurance Agreement between the Issuer and the Insurer.

Cardholder

Holder of a Card.

CI

The Terms and Conditions of Insurance, which include all provisions for the affiliation contract.

Elemental Occurrence

A sudden, unforeseeable natural disaster that has the characteristic of a catastrophe. The event causing damage is caused by geological or meteorological processes.

Epidemic

An epidemic is an infectious disease (e.g., influenza) that occurs to an extraordinary degree, limited in location and time.

Extreme Sports

The practice of unusual sports disciplines in which the person in question is exposed to maximum physical and psychological stresses (e.g., Ironman Hawaii Distance).

Extreme Weather Events/Severe Weather

Unforeseen weather situations that significantly deviate from the average in their course, such as strong thunderstorms, storm, hurricane, intense precipitation, etc.

GCI

The General Terms and Conditions of Insurance that apply to all insurance benefits (Part III).

Gross Negligence

Anyone who violates a fundamental duty of caution that would seem obvious to any reasonable person in the same situation, acts with gross negligence.

Illness

Illness is any impairment of physical, mental, or psychological health that is not a consequence of an accident and that requires a medical examination or treatment or results in an incapacity to work.

Insurer & Claims Adjuster

The Insurer is EUROPEAN Travel Insurance Co. Ltd (hereinafter referred to as "the Insurer") with registered offices at St. Alban-Anlage 56, P.O. Box, 4002 Basel.

Insured Event

The event that causes damage covered by the insurance.

Insured Persons

The insurance is only valid for persons who have their permanent residence under civil law or their habitual abode in Switzerland.

The insured person is the person who registered with the Issuer for the Collective Insurance Agreement (principal cardholder). The following persons are also deemed insured persons in addition to the principal cardholder:

– Any additional cardholders

– Marital or domestic partners, minor children, as well as minor visiting children and foster children of the principal or additional cardholders (regardless of whether they live in a common household with the principal/additional cardholder)

– The following persons living with the principal or additional cardholder in a common household: parents, grandparents, adult children, and grandchildren

Issuer

Swisscard AECS GmbH as issuer of the cards as well as third parties commissioned by it for processing the card relationship.

Limit of Indemnity

Amount of the maximum claim to benefits pursuant to the summary of insurance benefits.

Place of Residence/Country of Residence/Country of Domicile

The country of residence is the country in which the insured person has his permanent residence under civil law or his habitual abode, or most recently had prior to beginning the insured stay.

Policyholder

The policyholder is the Issuer.

Principal Cardholder

The person who has applied for a principal card and who can apply for additional cards on his responsibility and account.

Public Transportation

Public transportation is all air, land, or water vehicles permitted for public transport of persons. Means of transport that operate in the context of tours, as well as rental cars and taxis, shall not be deemed public transportation.

Robbery

Theft using or threatening force.

SCI

The Special Terms and Conditions of Insurance that apply to individual insurance benefits (Part IV).

Sporting Goods

Sporting goods are all objects that are required to practice a sport (e.g., skis, snowboards, hunting rifles, diving and golf equipment, etc.), including accessories.

Switzerland

The Switzerland area of application includes Switzerland and the Principality of Liechtenstein.

Terrorism

Terrorism is deemed to be any act of violence or threat of violence to achieve political, religious, ethnic, ideological, or similar goals. The act of violence or the threat of violence are intended to spread fear or terror in the population or portions thereof or to have an influence on a government or government institution.

Travel

Travel includes at least one overnight stay outside of the permanent residence and must include travel to and from.

Travel Service/Arrangement

Travel services/arrangements are deemed to be booking a flight, ship, bus, or train travel, a bus transfer or another transport to the place of stay or return, or locally booking a hotel room, a vacation apartment, a motor home, a houseboat, or chartering a yacht.

Unrest of All Kinds

Violence against persons or property on the occasion of riotous assembly, riot, or disturbance.

Valuable Objects

All products with a replacement value of CHF 500 or more shall be deemed valuable objects.

II. Summary of Insurance Benefits

Insurance benefits	Maximum benefit amounts in CHF per insured event			
	Classic	Premium	Exclusive	Geographic validity
The Travel Insurance is offered in the variants Classic, Premium, and Exclusive. The applicable variant of the Travel Insurance and the relevant applicable benefit modules (A-D) will be communicated to the customer in the insurance certificate.				
A. Cancellation Costs and Travel Cancellation Assumption of cancellation costs when travel is not commenced, as well as the unused portion of the arrangement in case of premature termination of travel due to serious illness, accident, or death	6,000	12,000	18,000	worldwide
B. Luggage Cover/insurance for personal luggage at replacement value against theft, robbery, damage, or destruction as well as loss by the operators of public transportation	2,000	4,000	6,000	worldwide
C. Repatriation Twenty-four hour helpline with organization and cover of cost of transport to the hospital, return to the place of residence, or search and rescue operations due to serious illness, accident, or death	200,000	400,000	600,000	worldwide
D. Travel Inconvenience Cover of additional expenses due to: • Flight cancellation, flight delay of at least 4 hours and missed connecting flight • Luggage delayed by at least 6 hours • Luggage delayed by at least 48 hours	200 400 800	400 800 1,600	800 1,000 2,000	worldwide

III. General Terms and Conditions of Insurance (GCI)

1 When does the insurance cover begin and end?

1.1 Registration term

Insurance cover begins according to notice from the Issuer on the date that was agreed upon by the cardholder with the Issuer at registration with the Collective Insurance Agreement. The registration with the Collective Insurance Agreement shall apply for one year from the date shown in the insurance certificate. After passage of this year, the registration will be extended by tacit agreement by one month unless the cardholder or the Issuer gives notice of termination in writing in compliance with a notice period of 30 days, effective at the end of the month.

Insurance cover terminates in all cases upon termination of the card relationship pursuant to the Issuer's General Terms and Conditions of Insurance or upon termination of the registration with the Collective Insurance Agreement.

1.2 Applicability period and area of application

The insured event must occur during the insurance term. Prior or subsequent events will not be taken into consideration.

Insurance cover applies worldwide for private travel for a maximum of 90 days, regardless of whether the travel service was obtained using the Card. In case of longer stays, cover lapses starting on the 91st day.

The insurance cover also applies to booked services that were booked a maximum of six months prior to commencement of insurance as long as the insured event occurs after the beginning of insurance.

The insurance cover for the individual services can be limited in time. Please note the information in the SCI. If the insurance cover is limited in time, the arrival and departure dates shall be calculated as one day each.

1.3 Transfer of Terms and Conditions of Insurance

The present Terms and Conditions of Insurance (CI) will be delivered to the cardholder upon registration with the Collective Insurance Agreement and are available on the Issuer's website.

2. When does insurance cover not apply, or only with restrictions?

2.1 Similar claims

If the insured person has a claim from another insurance contract (voluntary or obligatory insurance), then the Insurer's cover will be limited to that portion of the insurance benefits that exceeds what is covered by the other insurance contract. The costs will only be reimbursed a total of one time (clause of complementary and secondary benefits).

2.2 Third-party benefits

If the Insurer has paid benefits for a claim that was insured elsewhere, such benefits shall be deemed an advance. Repayment of the advance shall occur by assignment to the Insurer of the insured person's claims against the other insurer that owes benefits. The assignment shall occur in place of payment and shall discharge the insured person's obligation.

2.3 General exclusions

The following events are not covered:

- 2.3.1 Events that already occurred or were discernable at conclusion of the insurance or booking the travel, or could have – hypothetically – been diagnosed by a physician during an examination. The provisions pursuant to Section IV. A. 1.4 and Section IV. C. 1.2 remain reserved.

- 2.3.2 Events arising in connection with illnesses and accidents that were not diagnosed by a physician and documented using a physician's certificate immediately following the time of occurrence.
- 2.3.3 Events where the expert (technical expert, physician, etc.) making findings about the claim directly benefits from it or is related by blood or marriage to the insured person.
- 2.3.4 Events that are a consequence of acts of war or are attributable to terrorism, subject to the provisions pursuant to Section IV. A. 1.2.5.
- 2.3.5 Events in connection with kidnappings.
- 2.3.6 Events that are a result of orders by government agencies (arrest or bans on leaving a country, closure of airspace, etc.).
- 2.3.7 Events occurring as a result of participating in:
 - Competitions, races, rallies, or training programs using motor vehicles or boats
 - Competitions and training programs in connection with professional sports or an extreme sport
 - Trekking trips and mountain trips with sleeping at an altitude above 4,000 meters above sea level
 - Risky actions (risks) in which persons intentionally put themselves in particularly great danger
- 2.3.8 Events occurring while driving a motor vehicle or boat without the legally required driving license, or if the accompanying person required by law is not present.
- 2.3.9 Events occurring under the influence of alcohol, drugs, narcotics, or medications.
- 2.3.10 Events occurring during intentional commission of crimes and misdemeanors or attempting to do so.
- 2.3.11 Events occurring in connection with suicide or self-mutilation, or attempting to do so.
- 2.3.12 Events caused by ionizing radiation of any kind whatsoever, particularly including nuclear transformations.
- 3 What must be done in case of an insured event? (obligations)**
- 3.1 Contact:
 - In case of a claim, Customer Service at Würth Financial Services AG, Churerstrasse 10, 9400 Rorschach, Switzerland, Telephone +41 44 723 44 15, creditcards@wueth-fs.com
 - In case of emergency, the ALARM CENTER with 24-hour service, either at **+41 848 801 803** or at the **toll-free number +800 8001 8003**, Fax +41 848 801 804. It is available to you day and night (also on Sundays and holidays). The ALARM CENTER will advise you as to the appropriate steps to take and will organize the necessary assistance.
- 3.2 The insured person must do everything before and after the claim event that contributes to avoiding or mitigating and clarifying the damage.
- 3.3 The Insurer must be provided with the requested information immediately and the necessary documents must be submitted.
- 3.4 In case of illness or accident, a physician must be visited immediately, informed of the travel plans, and his instructions must be followed. The insured person/ person entitled to claim must release the physicians who treated them from the duty of confidentiality vis-à-vis the insurers regarding information that the Insurer needs in order to decide whether he has a duty to pay benefits.
- 3.5 In addition, we recommend that persons with chronic illnesses have their ability to travel confirmed in a physician's certificate issued immediately prior to booking a travel service.
- 4. What are the consequences of not complying with obligations?**
- 4.1 In case of a culpable breach of obligations in case of a claim, the Insurer is authorized to reduce the compensation by the amount that it would have been reduced in case of behavior in compliance with the terms.
- 4.2 The Insurer's duty to pay benefits lapses if
 - false statements are fraudulently made,
 - facts are fraudulently concealed,
 - the required obligations (including police report, recording of facts, confirmation, and receipts) are fraudulently breached, and/
 - or if the Insurer suffers a disadvantage due to this action.
- 5. What applies to the provision of benefits?**
- 5.1 The Insurer shall in principle pay its benefits in CHF. Translation of foreign currency will use the exchange rate of the date on which the costs were incurred.
- 5.2 Benefits improperly obtained from the Insurer must be reimbursed to the Insurer together with the expenses incurred by doing so, within 30 days, according to the rules of Article 62 et seq. CO.
- 5.3 When evaluating whether travel into a country is or is not reasonable due to strikes, unrest, war, terror attacks, epidemics, etc., the applicable recommendations of the Swiss authorities shall fundamentally apply. This is primarily the Swiss Federal Department of Foreign Affairs (FDFA) and the Swiss Federal Office of Public Health (FOPH).
- 6. Change in scope of cover or premiums**
- Changes in the premiums, these terms and conditions, and/or the insured amounts can be agreed upon by the Insurer and the Issuer (as the policyholder). The principal cardholder will be informed thereof in a timely manner and in suitable form. They shall be deemed accepted by the principal cardholder if the insurance cover has not been cancelled by a date before the amendments enter into force.
- There is no obligation to inform the principal cardholder in case of changes to the terms and conditions that cannot have a negative effect on the insured person.
- 7. When do the claims arising from the contract become time-barred?**
- The claims become time-barred two years after occurrence of a claim event.
- 8. Which court is competent?**
- The courts of the Swiss permanent residence of the person entitled to make a claim, or those of the registered offices of the Insurer, Basel, shall be available to the person and shall have exclusive jurisdiction and venue.
- 9. Which law applies?**
- Swiss law shall apply exclusively to the Collective Insurance Agreement, particularly the Swiss Federal Law on Insurance Contracts (VVG).
- 10. What is the data protection policy?**
- The Insurer, the Issuer, and persons commissioned by the aforementioned persons are authorized to exchange with each other the data relating to the insured persons that is directly necessary for registering with the collective insurance, contract processing, and claims processing, with a waiver of any duty of confidentiality or secrecy, and to obtain it from involved third parties (e.g., the Issuer) and process it. In particular, the Issuer is deemed authorized to disclose the fact that a corresponding card relationship exists between the Issuer and the principal/additional cardholder for the purposes mentioned above. This authorization shall not lapse upon the death, loss of legal capacity, or bankruptcy of the principal/additional cardholder. Likewise, the Insurer, the Issuer, and persons commissioned by the aforementioned persons are deemed authorized within the framework of the contract and claims processing to obtain relevant information from such third parties and to examine official files. The Insurer and the Issuer agree to treat information received in this way as confidential (including the duty to so oblige appointed agents). The data will be stored physically and/or electronically. If necessary, the data will be forwarded to third parties, specifically to co-insurers, reinsurers, and other involved insurers, companies providing services, and assistance service providers in Switzerland and abroad. In addition, information can be forwarded to other liable third parties and their liability insurance providers in order to enforce rights of recourse. The Insurer is authorized to communicate the suspension, amendment, or termination of the insurance as well as denial of an insured event to third parties (specifically competent authorities, government departments, and the Issuer) to whom the insurance cover was notified.
- 11. What else must be noted?**
- In case of doubt, the German version shall exclusively govern the interpretation and the content of all documentation.

IV. Special Terms and Conditions of Insurance (SCI)

IV. A. Cancellation Costs and Travel Cancellation

1. Insured events

1.1 Cancellation costs

The Insurer provides insurance cover when the insured person cannot commence the booked travel service as a result of one of the events listed below, insofar as it occurred after purchase of the insurance or booking the travel:

- 1.1.1 Unforeseeable serious illness, serious injury, serious complications of pregnancy, or death of
 - an insured person,
 - a co-travelling person,
 - a non-co-travelling person who is very close to the insured person,
 - the insured person's immediate substitute at the place of employment, so that the presence of the insured person there is indispensable.
- 1.1.2 Strike (except for active involvement) on the planned travel route abroad. Unrest of all kinds, quarantine, epidemics, or elemental occurrences at the travel destination if they actually endanger the life and property of the insured person.
- 1.1.3 Serious impairment of the insured person's property at his place of residence as a result of fire damage, elemental damage, theft, or water damage, so that his presence at home is indispensable.
- 1.1.4 Cancellation or delay, as a result of either a technical defect or extreme weather events, of the public transportation to be used to the official place of departure (airport, departure railway station, port, or coach boarding location) in the country of residence.
- 1.1.5 If, within 30 days prior to departure
 - the insured person unexpectedly starts a new permanent position in an employment relationship at a new employer (promotions and the like are excluded), or
 - the insured person's employment contract is terminated by his employer at no fault of his own.
- 1.1.6 Theft of tickets, passport, or identity card.
- 1.1.7 Pregnancy of an insured person if the date of return travel is later than the 24th week of pregnancy or if an immunization is required for the travel destination that represents a risk for the unborn child.

1.2 Travel cancellation

The Insurer provides insurance cover when the insured person must terminate, interrupt, or extend the booked travel service as a result of one of the events listed below:

- 1.2.1 Unforeseen serious illness, serious injury, serious complications of pregnancy, or death of
 - an insured person,
 - a co-travelling person,
 - a non-co-travelling person who is very close to the insured person,
 - the insured person's immediate substitute at the place of employment, so that the presence of the insured person there is indispensable
- 1.2.2 Strike (except for active involvement) on the planned travel route abroad. Unrest of all kinds, quarantine, epidemics, or elemental occurrences at the travel destination if they actually endanger the life and property of the insured person and therefore render continuation of the travel or the stay impossible or unreasonable.
- 1.2.3 Serious impairment of the insured person's property at his place of residence as a result of fire damage, elemental damage, theft, or water damage, so that his presence at home is indispensable.
- 1.2.4 Cancellation of booked or used public transportation as a result of a technical defect or as a result of extreme weather events, insofar as continuation of the travel as planned is therefore not guaranteed. Delays or detours of the booked or used public transportation shall not be considered cancellation. No claim shall exist in case of breakdowns of or accidents to private vehicles that are driven by the insured person himself or used as a passenger for performance of the travel.
- 1.2.5 Acts of war or terrorist attacks within 14 days after they first occur, insofar as the insured person is surprised by them while abroad.
- 1.2.6 Theft of tickets, passport, or identity card: Only the services pursuant to Section 2.2.5 are covered.
- 1.3 If the person who causes the cancellation, termination, interruption, or exten-

sion of the travel due to an insured event is not related to the insured person either by blood or by marriage, then a claim will only exist if the insured person would have to start/continue the travel alone.

- 1.4 If an insured person suffers from a chronic illness without this therefore making the travel questionable upon registration with the Collective Insurance Agreement or at booking or before starting the travel, then the Insurer will pay the insured costs incurred if the travel must be cancelled, interrupted, terminated, or extended due to unforeseen serious acute worsening of this illness, or if death occurs as a result of the chronic illness.

2. Insured benefits

The governing point in time for assessing the right to make a claim is the time of the event that triggers the cancellation, termination, interruption, or extension of the travel service.

The Insurer will provide the following benefits up to the maximum amount listed in the summary of insurance benefits per insured event overall.

2.1 Cancellation costs

Upon occurrence of an insured event, the Insurer will pay:

- 2.1.1 The cancellation costs actually incurred (excluding security and airport fees). Overall, these benefits are limited by the price of the travel arrangements or the insured amount listed in the summary of insurance benefits. Illegally charged service charges or those charged multiple times are not covered.
- 2.1.2 The additional costs for the delayed commencement of travel if the travel service cannot be commenced at the planned time due to the insured event; this benefit is limited to the travel service price or to a maximum amount of CHF 3,000 per person. If additional costs are claimed, the claim to cancellation costs pursuant to Section 2.1.1 shall lapse.

2.2 Travel cancellation

Upon occurrence of an insured event, the Insurer will pay:

- 2.2.1 The costs of temporarily returning to the place of residence up to CHF 3,000 per person (round-trip travel for a maximum of two insured persons), insofar as a time-limited stay with return travel was booked in advance.
- 2.2.2 The additional costs of an unplanned return trip, specifically based on 1st Class by train and Economy Class by air.
- 2.2.3 The proportional costs of the unused travel arrangement (excluding costs of the originally booked return trip); this benefit is limited to the travel price or to the insured amount listed in the summary of insurance benefits.
- 2.2.4 Either the additional costs for continuation of the travel including lodging, meals, and communications costs for discussions with the ALARM CENTER (for a maximum of 7 days) up to an amount of CHF 700 per person or in case of use of a rental car, up to CHF 1,000, regardless of how many persons use the rental car.
- 2.2.5 Organizing blocking of mobile telephones, credit cards, and customer cards, but not the costs arising from this action.

3 Exclusions

Benefits are excluded:

- 3.1 If the service provider (travel operator, landlord, organizer, etc.) cancels, modifies, or terminates the agreed upon service or would have had to cancel, modify, or terminate it for objective reasons.
- 3.2 If the ailment that gave rise to the cancellation, travel termination, interruption, or extension was a complication or a result of a medical treatment or operation that was already planned at the commencement of insurance or at booking or before starting travel.
- 3.3 If an illness or the consequences of an accident, an operation, or a medical intervention already existed at the time of booking travel and are not healed by the travel date.
- 3.4 Upon cancellation with regard to Section 1.1.1 without a medical indication and when the physician's certificate was not issued at the time of the first possible determination of inability to travel or was achieved by a telephone consultation.
- 3.5 In case of travel termination, interruption, or extension with regard to Section 1.1.1 without medical indication (e.g., in case of adequate medical care on site, etc.), and if no physician at the location was consulted.

- 3.6 When a cancellation as the result of a psychological or psychosomatic ailment – cannot be established by the diagnosis and a certificate issued on the date of cancellation by a psychiatric specialist, and
– cannot be additionally established by persons in an employment relationship by providing a 100% absence confirmation from the employer during the term of the inability to travel that is attested by a physician.
- 4 Obligations in case of a claim**
- 4.1 **Cancellation costs**
The booking office (travel agency, transport company, landlord, etc.) must be notified immediately after occurrence of the event.
- 4.2 **Travel termination**
The insured person is obligated to make use of the benefits pursuant to Section 2.2 through the ALARM CENTER and to have them approved in advance by the ALARM CENTER or the Insurer. Otherwise, the reimbursement can be reduced to the amount that would have been incurred if the ALARM CENTER had organized the benefits or would have been able to influence them.
- 4.3 Immediately upon discovering that a claim event has occurred, the insured person must report the claim to:
Würth Financial Services AG, Credit Card Department, Churerstrasse 10, 9400 Rorschach, Switzerland, Telephone: +41 44 723 44 15, Fax: +41 44 723 44 55, Email: creditcards@wuertth-fs.com
- 4.4 The following documents, among others, must be submitted to the Insurer or Würth Financial Services AG:
– The booking confirmation/invoice for the arrangement
– The invoices for the cancellation or subsequent travel costs (originals)
– A detailed physician's certificate or a certification of death or another official certificate
- IV. B. Luggage**
- 1. Insured items**
- 1.1 All items that the insured persons take with them on the trip for personal needs are covered.
- 1.2 Insurance cover for sports equipment, wheelchairs, and strollers applies exclusively during transport using public transportation and as long as these items are in the care of the transport company.
- 2. Non-insured items**
No insurance cover shall exist in the case of:
- 2.1 Cash and tickets (subject to Section 4.3), securities, legal documents, and documents of all kinds (subject to Section 4.6), software, precious metals, precious stones and pearls, postage stamps, merchandise, samples of merchandise and items with value as art or collectibles, musical instruments, motor vehicles, bicycles, trailers, boats, surfboards, caravans, and aircraft, each with all of its accessories.
- 2.2 Valuable items that are covered by a separate insurance policy.
- 3. Insured events**
- 3.1 The following are insured:
– Theft, burglary, robbery
– Damage, destruction
– Loss during transport by the operators of public transportation
- 3.2 For camping, events pursuant to Section 3.1 are only insured within official campgrounds.
- 4. Insured benefits**
The governing factor for assessing the right to make a claim is the time of the incident in which the luggage is affected by an insured event. The Insurer will provide the following benefits up to the maximum amount listed in the summary of insurance benefits per insured event overall:
- 4.1 In case of a total loss of the insured items, the replacement value
- 4.2 In case of partial loss, the costs of repair, but no more than the replacement value
- 4.3 Cash and tickets exclusively in case of robbery, and then up to 20% of the insured amount
- 4.4 Breakage up to 20% of the insured amount
- 4.5 Eyeglasses, contact lenses, prostheses, and wheelchairs up to 20% of the insured amount
- 4.6 In case of theft or loss of passport, identity card, driver's license, vehicle registration, and similar identification, as well as keys, the replacement costs
- 4.7 In case of theft or loss of credit cards and mobile telephones, the organization (but not the costs) of blocking
- 4.8 For the non-valuable items left in a locked vehicle, boat, or tent, up to 50% of the insured amount
- 5. Exclusions**
Benefits are excluded:
- 5.1 For damage as a result of wear and tear, spoilage, weather, insufficient or defective characteristics or packaging of the items
- 5.2 For damage resulting from leaving, misplacing, losing, dropping
- 5.3 For items that are left behind at a place accessible to anyone, beyond the control of the insured person, even if only for a short time
- 5.4 For items whose safekeeping is not adequate for their value
- 5.5 For valuable items that are left in a vehicle, boat, or tent, or are delivered to a transportation company for transport, as long as these items are in the care of the transportation company
- 5.6 For items that are left on or in vehicles, boats, or tents during the night (10.00 p.m. to 6.00 a.m.).
- 6. Obligations during travel**
- 6.1 When valuable items are not being worn or used, they must be
– delivered to a lodging provider or a watched coat room for storage, or
– stored in a locked room not accessible to everyone, and under separate lock and key therein, whereby bags of all kinds, beauty cases and attaché cases, as well as jewelry boxes are insufficient as containers.
- 6.2 The travel advisories of the Swiss Federal Department of Foreign Affairs (FDFA) regarding the specific travel destination, particularly regarding criminality at that location and regarding the related precautions, must be followed.
- 7. Obligations in case of a claim**
- 7.1 The insured person must
– in case of theft or robbery, apply for an official investigation at the nearest police office within 48 hours or file a report on the case (police report, airline ticket loss report, etc.),
– in case of damage or loss during transport of luggage, obtain immediate confirmation from the responsible office (hotel management, tour director, transportation company, etc.) of the causes, circumstances, and extent of the damage in a statement of facts, and also apply for compensation from that office,
– after returning from the trip, notify Würth Financial Services AG or the Insurer in writing immediately and justify the claims.
- 7.2 Immediately upon discovering that a claim event has occurred, the insured person must report the claim to:
Würth Financial Services AG, Credit Card Department, Churerstrasse 10, 9400 Rorschach, Switzerland, Telephone: +41 44 723 44 15, Fax: +41 44 723 44 55, Email: creditcards@wuertth-fs.com
- 7.3 The following documents, among others, must be submitted to the Insurer or Würth Financial Services AG:
– The original of the statement of facts (police report, airline ticket loss report, etc.)
– The original confirmation, receipts, or purchase confirmations
- 7.4 Damaged items shall be kept for disposition by the Insurer.
- IV. C. Repatriation**
- 1. Insured events**
- 1.1 Unforeseen serious illness, serious injury, serious complications of pregnancy, or death of an insured person are covered.
- 1.2 If an insured person suffers from a chronic illness without this therefore making the travel questionable upon purchase of the insurance or at booking or before starting the travel, then the Insurer will pay the insured costs incurred if the insured person must be repatriated due to unforeseen serious acute worsening of this illness, or if death occurs as a result of the chronic illness.
- 2. Insured benefits**
The governing point in time for assessing the right to make a claim is the time of the incident that triggers the repatriation.

- The Insurer will provide the following benefits up to the maximum amount listed in the summary of insurance benefits per insured event overall:
- 2.1 **Costs of:**
 - Transfer to the nearest hospital suitable for treatment
 - Medically attended emergency transportation to the hospital suitable for treatment at the place of residence of the insured person

Only the Insurer's physicians will decide on the necessity as well as the nature and timing of these benefits.
 - 2.2 Organization and payment of round-trip travel for a person very close to the insured person to his hospital bed, specifically based on 1st Class by train and Economy Class by air, up to CHF 5,000.
 - 2.3 The costs of any necessary search and rescue operation up to CHF 10,000 per person, if the insured person is considered missing or must be rescued.
 - 2.4 Organization and costs for formalities ordered by government agencies if an insured person dies during travel. In addition, the Insurer will assume the costs of cremation outside of the country of residence or the additional costs to comply with the International Agreement on Body Transport (minimum regulations such as a zinc coffin or zinc lining) as well as return shipping of the coffin or the urn to the last place of residence of the insured person.
 - 2.5 A reimbursable cost advance of up to CHF 5,000 per person, if an insured person must be hospitalized abroad (repayment within 30 days after return to the place of residence).
 - 2.6 The decision as to the necessity as well as the nature and timing of these benefits shall be made by the Insurer.
3. **Exclusions**
All incidents listed under Section IV. A. 3. are not covered.
 4. **Obligations in case of a claim**
 - 4.1 The insured person is obligated to make use of the benefits pursuant to Section 2.1 through the ALARM CENTER and to have them approved in advance by the ALARM CENTER or the Insurer. Otherwise, the reimbursement can be reduced to the amount that would have been incurred if the ALARM CENTER had organized the benefits or would have been able to influence them.
 - 4.2 Immediately upon discovering that a claim event has occurred, the insured person must report the claim to:
Würth Financial Services AG, Credit Card Department, Churerstrasse 10, 9400 Rorschach, Switzerland, Telephone: +41 44 723 44 15, Fax: +41 44 723 44 55, Email: creditcards@wuerth-fs.com
 - 4.3 The following documents, among others, must be submitted to the Insurer or Würth Financial Services AG:
 - A detailed physician's certificate or a certification of death or another official certificate
- 1.2 Cancellation by the airline or overbooking of a confirmed airline flight and when no alternative is available within at least four hours
 - 1.3 Missed airline connection as a result of delay of the first airline flight and when no alternative is available within at least four hours after arrival of the delayed flight
 - 1.4 Delayed delivery of luggage by at least six hours by the operator of public transportation
2. **Insured benefits**
The governing point in time for assessing the right to make a claim is the time of the incident at which the insured event occurs.
The Insurer will provide the following benefits secondarily to the benefits of the airline company up to the maximum amount listed in the summary of insurance benefits per insured event overall.
 - 2.1 **Flight delay**
When an insured event occurs, the Insurer will assume the additional costs (meals, lodging, rebooking costs, costs for alternative transport – e.g., taxi to another departure airport – telephone charges) in order to continue the trip.
 - 2.2 **Luggage delay**
Upon occurrence of an insured event, the Insurer will assume the costs for absolutely necessary acquisitions. In case of return travel to the place of residence, there shall be no claim to reimbursement.
 3. **Exclusions**
Benefits are excluded if the insured person is responsible for the delay.
 4. **Obligations in case of a claim**
 - 4.1 The insured person must
 - obtain immediate confirmation from the responsible airline of the causes, circumstances, and extent of the damage in a statement of facts, and also apply for compensation from that airline,
 - after returning from the trip, notify the Insurer or Würth Financial Services AG in writing immediately and justify the claims.
 - 4.2 Immediately upon discovering that a claim event has occurred, the insured person must report the claim to:
Würth Financial Services AG, Credit Card Department, Churerstrasse 10, 9400 Rorschach, Switzerland, Telephone: +41 44 723 44 15, Fax: +41 44 723 44 55, Email: creditcards@wuerth-fs.com
 - 4.3 The following documents, among others, must be submitted to the Insurer or Würth Financial Services AG:
 - Documentation of delay from the air transport company as well as documentation that no alternative was offered within four hours
 - Confirmation of compensation paid by the airline
 - The original documentation for the additionally incurred costs

IV. D. Travel Inconvenience

1. Insured events

- The Insurer will provide insurance cover in the following cases:
- 1.1 Delay of a confirmed airline flight by at least four hours

Insurer

EUROPEAN Travel Insurance Co. Ltd
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