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Travel Guard[®] Travel Insurance Terms & Conditions

Multi Risk Travel insurance
Travel Guard[®] Multi Risk Single Trip 102-3815
Travel Guard[®] Multi Risk Annual Travel Insurance 102-5171

Travel Guard® Multi Risk Travel Insurance

TRAVEL INSURANCE

Travel insurance covering personal injury is always highly recommended. Travel Guard travel insurance helps when sudden and unpleasant changes interfere during your travel.

Travel Guard travel insurance is available for everyone under 70 years of age living permanently in Finland and eligible for National Health Insurance benefits in Finland.

AIG is subject to compliance with US sanctions laws. For this reason, this policy does not cover any loss, injury, damage or liability, benefits or services directly or indirectly arising from or relating to a planned or actual trip to or through Cuba, Iran, Syria, North Korea or the Crimea region. In addition, this policy does not cover any loss, injury, damage or liability to residents of Cuba, Iran, Syria, North Korea or the Crimea region.

Lastly, this policy will not cover any loss, injury, damage or legal liability sustained directly or indirectly by any individual or entity identified on any applicable government watch lists as a supporter of terrorism, narcotics or human trafficking, piracy, proliferation of weapons of mass destruction, organized crime, malicious cyber activity, or human rights abuses.

You can choose Travel Guard's travel insurance from 3 different levels; Bronze, Silver and Gold. Bronze level insurance contains cover for trip cancellation, trip interruption, delay in departure, missed departure and legal aid. Please note that Bronze level does not cover medical expenses for travel-time illness or travel accident.

Silver – and Gold level travel insurance are comprehensive travel insurances which include all relevant travel insurance elements such as medical expenses due to sickness or accident, loss of baggage, trip cancellation, trip delay, legal expenses and personal liability.

Travel Guard insurances can be bought for single trip or as annual policy, which allows cover for unlimited number of travels during one year. On annual policy maximum duration for one trip is 31 days.

If case of any questions related to insurance please contact **AIG customer services +358 20 350 550**.

In case of injury we recommend the insured to first meet minor costs themselves, such as normal medical treatments and medical examinations, and then subsequently apply for indemnity from AIG Europe S.A. In serious medical emergencies the insured should contact SOS Emergency Service +45 38 48 93 38 (24/7/365).

PLEASE NOTE THAT THE INSURED CANNOT APPLY FOR INDEMNITY FROM SICKNESS OF WHICH THE INSURED WAS AWARE OF BEFORE BUING THE INSURANCE.

Please read below the complete insurance terms and conditions and exclusions. Insurance terms and conditions are available in Finnish, Swedish and English and the documents can be requested from AIG as hard copies. It is advised to safe and store the terms and conditions for the future reference.

In case of discrepancies, the Finnish version shall prevail.

TRAVEL GUARD® Multi Risk Travel Insurance, Terms & Conditions, valid from 1st December 2018

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Key contact information

AIG CUSTOMER SERVICE

If you have questions regarding the policy or would like more information, please contact:

AIG Customer Service

Tel.: +358 203 50550

Fax: +358 9 6860 3880

E-mail: travelguardfinland@aig.com

Telephone service hours Mon-Fri 9am–9pm, Sat 10am–4pm

EMERGENCY ASSISTANT SERVICE

If you require medical emergency assistance on your trip, contact

Emergency Assistant Service SOS International AS

Copenhagen, Denmark

Tel.: +45 7010 5054

Fax: +45 7010 5056

E-mail: sos@sos.dk

The Emergency Assistant Service is available in Finnish, Swedish and English 24/7/365. When contacting the Emergency Assistant Service, please

give the following information: Policy number (stated in your policy document), your name and address and your contact information at the travel destination.

AIG CLAIMS SERVICE

In case of loss events, please make loss notification on AIG web site: <https://www.aig.fi/vahinkoilmoitus-verkossa> or print the loss notification form: www.aig.fi/vahingot and post it to AIG.

If you have any questions on how to make the loss notification, please contact:

AIG Customer Service

Tel.: +358 203 50550

Fax: +358 9 6860 3880

E-mail: travelguardfinland@aig.com

Telephone service hours Mon-Fri 9am–9pm, Sat 10am–4pm

Travel insurance

The insurer of this Travel Guard insurance is the Finland branch of the insurance organization AIG Europe S.A. (hereinafter "AIG"), register no 2922692-7; address Kasarmikatu 44, 00130 Helsinki Finland.

AIG Europe S.A. is an insurance undertaking with R.C.S. Luxembourg number B 218806. AIG Europe S.A. has its head office at 35 D Avenue John F. Kennedy, L-1855, Luxembourg, <http://www.aig.lu/>. AIG Europe S.A. is authorised by the Luxembourg Ministère des Finances and supervised by the Commissariat aux Assurances 7, boulevard Joseph II, L-1840 Luxembourg, GD de Luxembourg, Tel.: (+352) 22 69 11 - 1, caa@caa.lu, <http://www.caa.lu/>.

The insurance terms and conditions and policy document serve as proof of an insurance contract between the insured and AIG. These insurance terms and conditions include terms and limitations for different types of coverage as well as general terms and limitations that apply to all types of coverage.

1. Insured

The policy is valid for the persons named in the policy document providing that the insurance premium has been paid. All insured must be under the age of 70 when the insurance is taken out, permanent residents in Finland and be eligible for National Health Insurance benefits in Finland.

This policy offers coverage only to individuals ordinarily resident in Finland and is null and void as to nonresidents of Finland.

2. Insurance validity

2.1 Geographical limits

The policy is valid on trips everywhere in the world, except on trips to or through the following countries: Cuba, Iran, Syria, North Korea or Crimea region.

This policy will not cover any loss, injury, damage or legal liability arising directly or indirectly from planned or actual travel in, to, or through Cuba, Iran, Syria, North Korea or the Crimea region.

Cover is valid for trips in Finland once insured is staying for at least two nights in pre-booked and payable accommodation away from insured's home town.

2.2 Insurance period

The policy is valid for the time period specified in the policy document. Cancellation cover begins once a trip has been booked and the insurance premium has been paid. Cancellation cover ends once the insured's trip has started from the insured's home, workplace, place of study or another place of departure. The insurance cover for all other types of coverage begins once the insured departs from his/her home, workplace, place of study or another place of departure and ends once the insured returns home or to workplace, place of study or another place of departure. The single trip policy is valid for trips that do not last longer than 90 days. Annual multi trip policy covers unlimited number of trips within the period of cover shown in the policy certificate. In annual multi trip policy, the duration of a single trip may not exceed 31 days. If a trip lasts continuously longer than the period specified in the policy document, the insurance period will end on the date marked on the policy document.

2.3 Sports cover

The policy does not cover loss events caused in the following sports or activities:

- competitive sports or practice thereof;
- motor sports;
- scuba diving;
- winter sports: any form of downhill skiing, cross-country skiing or snow boarding unless the cover has been extended to include this;
- climbing sports, such as mountain, rock and wall climbing;
- aviation sports, such as hang gliding, paragliding, parachute jumping or bungee jumping;
- off-piste skiing, speed skiing or downhill;
- martial arts and contact sports, such as boxing, wrestling, judo or karate;
- independent treks or expeditions or similar activities abroad to mountains, jungles, deserts, wilderness areas or other uninhabited areas;
- ocean sailing.

3. Beneficiaries

In case of death, the beneficiaries are the insured's close family members, unless the insured has notified AIG of another beneficiary in writing. In other types of coverage, the insured is the beneficiary.

Policy contents

4. Policy contents

Check the Policy Certificate for correct coverage's to the insurance purchased.

Section	Types of coverage	Policy limit Bronze(EUR)	policy limit Silver (EUR)	Policy Limit Gold (EUR)	Policy excess
5	Medical expenses due to travel-time illness or travel accident	no compensation	no upper limit	no upper limit	-
6	Dental treatment expenses (acute and unexpected toothache on a trip)	no compensation	€ 200	€ 200	-
7	SOS International Emergency Assistant Service 24/7/365	included	included	included	-
8	Travel expenses of hospitalized insured's next of kin	no compensation	Reasonable transport, accommodation and meal expenses of one person for up to 5 days	Reasonable transport, accommodation and meal expenses of one person for up to 5 days	-
9	Repatriation to Finland due to travel-time illness or travel accident	no compensation	no upper limit	no upper limit	-
10	Repatriation expenses of a child travelling with the insured	no compensation	€ 10 000	€ 10 000	-
11	Repatriation of remains	no compensation	€ 30 000	€ 30 000	-
12	Accidental death, insured over 16 and under 71	no compensation	€ 40 000	€ 60 000	-
12	Accidental death, insured under 16	no compensation	€ 5 000	€ 5 000	-
13	Permanent disability due to accidental injury, 100%	no compensation	€ 40 000	€ 60 000	-
14	Trip cancellation	€3 000 or the cost of the original trip, whichever is lower	€5 000 or the cost of the original trip, whichever is lower	€7 000 or the cost of the original trip, whichever is lower	-
15	Trip interruption	€3 000 or the cost of the original trip, whichever is lower	€5 000 or the cost of the original trip, whichever is lower	€7 000 or the cost of the original trip, whichever is lower	-
16	Missed departure	€250 or the cost of the original trip, whichever is lower	€2 000 or the cost of the original trip, whichever is lower	€3 000 or the cost of the original trip, whichever is lower	-
17.1	Compensation for delayed departure	€10/hours, up to €250	€25/hours, up to €500	€25/hours, up to €500	6 hours
17.2	Abandonment of a trip	€3 000 or the cost of the original trip, whichever is lower	€5 000 or the cost of the original trip, whichever is lower	€7 000 or the cost of the original trip, whichever is lower	48 hours
18	Luggage compensation	no compensation	€ 1 000	€ 3 000	€ 50
18.1	Maximum limit of personal money and passport included in luggage benefit	no compensation	€ 300	€ 300	€ 50
18.2	Maximum limit of valuables included in luggage benefit	no compensation	€ 300	€ 500	€ 50
18.5	Delayed luggage – necessities	no compensation	€ 350	€ 500	6 hours
19	Hospital benefit	no compensation	€10/24h, up to maximum of €1 000	€10/24h, up to maximum of €1 000	-

20	Hijack	no compensation	€40/24h, up to maximum of €2 000	€40/24h, up to maximum of €2 000	-
21	Legal aid	€3 500,00	€10 000	€20 000	-
22	Liability compensation	no compensation	€100 000	€250 000	-
23	Winter sport benefit;				
23	travel accident caused by winter sport	no compensation	no upper limit	no upper limit	-
23.1	Winter sport equipment	no compensation	€600	€600	€50
23.2	Slope closure	no compensation	Travel expenses 20 €/24 h, up to 250 € or €30/24h, up to €250 if insured can not ski		-
23.3	Avalanche cover	no compensation	€320	€320	-
23.4	Ski equipment hire	no compensation	€25/24h, up to €150	€25/24h, up to €150	-

The policy limits given in the table indicate the maximum compensation per insured for each loss event covered by the policy. Types of coverage, their coverability and limitations are defined in full detail in the sections indicated in the table.

Excess Waiver Coverage is a benefit that can be chosen and paid separately after choosing the Multi Risk Travel Insurance. This coverage removes the euro amount excess on section 18 and 23. Excess Waiver Coverage does not remove the hour excess on the Compensation for delayed flight (section 17.1) or Cover for Delayed luggage (section 18.5).

5. Travel-time illness and travel accidents

Bronze – level does not cover this section

A travel-time illness or travel accident that started or occurred during the insurance period is covered in accordance with the insurance terms and conditions.

5.1 Travel-time illness

A travel-time illness means an illness which required treatment by a physician and which started or clear symptoms of which first manifested on a trip, or which, on the basis of medical experience, is considered to have otherwise originated on the trip and required medical treatment during the trip or within 14 days of the end of the trip. In case of a communicable disease with a longer incubation period, the 14-day rule does not apply. An illness which the insured had before the start of the trip is not considered a travel-time illness. An illness whose symptoms manifested before the start of the trip or which was being investigated before the start of the trip is not considered a travel-time illness, even if the illness is diagnosed during the trip. However, if an illness that began before the beginning of the trip suddenly and unexpectedly worsens during the trip, the insurance will compensate the expense for necessary emergency treatment for no more than 7 days, but not any other expenses stated in the insurance terms. The policy does not cover illnesses that began before the beginning of the trip and unexpectedly worsen during the trip, if they were being investigated or treated at the beginning of the trip.

5.2 Travel accidents

A travel accident is a sudden, unexpected, external occurrence beyond the control of the insured that causes bodily injury and takes place during the trip and requires medical treatment within 14 days of the accident. An injury caused to the insured on a trip by involuntary sudden exertion or movement that requires medical treatment within 14 days is also considered a

travel accident. The following events occurring during a trip are

also considered travel accidents: involuntary drowning, heatstroke, sunstroke, frostbite, injury caused by a major fluctuation in air pressure, gas poisoning and poisoning caused by a substance consumed by the insured by mistake. The policy does not cover injuries caused by:

- an illness or physical injury which the insured has had before;
- a loss event caused by a pre-existing illness or physical defect;
- damage caused to teeth or dentures by biting or chewing, even if external factors affected the damage;
- surgery, treatment or another medical procedure, unless it is undertaken to treat an injury coverable as a travel accident;
- suicide or attempted suicide;
- intoxication caused by medicinal drugs, alcohol or any other substance used or consumed for purpose of intoxication;
- a bacterial or viral infection;
- a communicable disease or illness caused by an insect or tick bite or sting.

5.3 Coverage of medical expenses due to travel-time illness and travel accidents

The policy covers medical expenses due to travel-time illness and travel accidents specified in sections 5.1 and 5.2 for the parts that are not covered under the Sickness Insurance Act or other legislation. Medical expenses are covered only for the parts that are not compensated based on legislation on compensation for traffic accidents or workmen's compensation while abroad, EU legislation or EEA treaties or bilateral social security agreements. Medical expenses due to travel-time

illness are covered for 60 days after the start of treatment. Medical expenses due to travel accidents are covered for one (1) year after the accident occurred. The policy only covers the expenses, which the insured would have to pay for the treatment. If it is evident that an expense for which compensation is sought exceeds the generally accepted and followed reasonable level, the insurer has the right to reduce the amount of compensation. When paying medical expenses for which the insured is compensated based on legislation, the insurer reserves the right to recover the medical expenses it has paid up to the sum for which the insured has been compensated based on legislation.

5.4 Coverable medical expenses

Compensation of medical expenses requires that the examination or treatment of illness or injury is prescribed by a doctor. The doctor must be a registered doctor with appropriate accreditation for the country in question and must not be a relative or family member of the insured. In addition, examinations and treatments must be in accordance with generally approved medical understanding and necessary for the illness or injury in question. Treatment must be received at a facility classified as a hospital, which diagnoses and uses medical procedures to treat ill and injured persons. Coverable medical expenses include:

- expenses of a generally approved and necessary examination or treatment given or prescribed by a doctor;
- medical treatment;
- hospital treatment;
- hospital stay;
- expenses of medicine sold with the permission of the national medicine agency and prescribed by a doctor for the treatment of a coverable illness or accident;
- reasonable and necessary travel expenses to visit a local doctor or medical facility at the destination;
- medical transport to the nearest hospital or medical facility where the insured can receive the necessary treatment;
- extra reasonable travel costs on return trip, provided that the insured is not able to return to the home country according to the original travel plan and the return is delayed, necessarily due to a compensable travel accident or illness and the original and paid ticket therefore remains unused;
- physiotherapy, up to 10 sessions per illness or injury.

Medical expenses are not covered:

- if the insured has prior to the trip refused treatment for an illness or injury or if treatment has been discontinued;
- for treatment of AIDS and HIV or consequences of STDs;
- if an illness or injury is due to intoxication caused by medicinal drugs, alcohol or any other substance used or consumed for the purpose of intoxication;
- for the psychiatric consequences of accidents;
- for stays at rehabilitation centers, health resorts, nature health clinics, hospices or treatment facilities for alcohol dependency or drug addiction;
- for further treatment, if the insured refuses repatriation in cases where a doctor approved by AIG has decided to repatriate the insured;
- if the insured after repatriation goes on a new trip without written approval from AIG;
- prenatal examinations, pregnancy tests, abortion, sterilization or related examinations;
- childbirth after the 28th week of pregnancy or other consequences of pregnancy that manifest;
- other indirect consequences, such as expenses due to

telephone calls or interpreter services or similar expenses.

6. Dental treatment expenses

Bronze – level does not cover this section

Expenses of necessary treatment of acute toothache are covered up to the policy limit specified in section 4, if the toothache starts and treatment is given at the destination during a trip. Dental treatment in Finland is not covered.

7. Emergency Medical Assistant Services by SOS International

SOS International is an emergency medical assistance company that assists insured who need emergency assistance on trips. Based in Copenhagen, SOS International AS serves customers around the clock in several languages. The insured is advised only to contact SOS International in serious medical emergencies and when coverability requires that SOS International has given permission for necessary procedures prior to a treatment or another type of service can be arranged or started (sections 8–11). The emergency medical assistance company can organize direct billing with the treatment facility, for example. In these cases, please contact SOS International as soon as possible after the start of hospital treatment.

8. Travel expenses of a hospitalized insured's next of kin

Bronze – level does not cover this section

The policy covers the reasonable expenses due to travel, accommodation and meals of one next of kin of the insured for up to five (5) days, as organized by SOS International, to allow the family member to visit the insured at the destination if the insured does not have next of kin at the destination and if the insured cannot be repatriated for medical reasons and must stay in hospital for over 10 days due to a coverable travel-time illness or travel accident.

9. Repatriation to Finland due to travel-time illness or travel accident

Bronze – level does not cover this section

The policy covers repatriation of the insured to Finland due to travel-time illness or travel accident, if it is arranged and approved beforehand by SOS International. Repatriation of the insured arranged by SOS International must always be medically justified in accordance with instructions of a doctor approved by AIG. AIG may demand that the insured is transported to Finland for medical treatment at AIG's expense if treatment at the location would be significantly more expensive than corresponding treatment in Finland.

10. Repatriation expenses of a child travelling with the insured

Bronze – level does not cover this section

The policy covers, up to the policy limit specified in section 4, repatriation of children under the age of 16 travelling with the insured, arranged and approved beforehand by SOS International, if the insured cannot be transported to Finland for medical reasons and must remain in hospital. Children's repatriation expenses are not covered if the other parent is also on the trip.

11. Repatriation of remains and casket expenses

Bronze – level does not cover this section

If the insured dies due to a travel-time illness or travel accident, repatriation of the remains arranged and approved beforehand by SOS International and casket expenses are covered. Expenses due to repatriation of remains and casket expenses are covered up to the policy limit specified in section 4.

12. Accidental death

Bronze – level does not cover this section

The policy compensates the insured's beneficiary for accidental death in accordance with section 4. A death benefit is paid if an accident leads to the death of the insured within a year of the accident.

Benefits paid to the insured for accidental permanent disability is deducted from the death benefit if the death was caused by the same accident. However, accidental death benefit is not paid if the insured dies more than one (1) year after the accident occurred.

13. Permanent disability due to accidental injury

Bronze – level does not cover this section

The policy covers permanent disability caused by a coverable accidental injury up to the policy limit specified in section 4. Permanent disability means a medically assessed general disability due to an injury sustained by the insured. In determining disability, only the nature of the injury is taken into account; the individual circumstances of the injured, such as his/her profession or leisure-time pursuits, do not affect the determination of disability. The degree of disability thus caused is determined in accordance with Government decree on the disability categories under the Workers' Compensation Act. Injuries are divided into disability categories 1–20, with category 20 corresponding to full disability (100%). For full and permanent disability, an indemnity is payable equal to the policy limit defined in section 4. For partial and permanent disability, an indemnity is payable equal to as many twentieths of the policy limit as indicated by the disability category. If several parts of the body are injured, the maximum amount of compensation is the policy limit defined in section 4 (degree of disability 100%). The insured is entitled to receive indemnity for permanent disability if an accident causes permanent disability of at least 10% (disability category 2). Permanent disability is determined at the earliest one (1) year after the accident. If the disability category rises by at least two (2) categories before three (3) years have passed since the first lump-sum compensation was paid for a permanent disability, the insured is paid additional compensation in proportion to the rise in disability category. After three years have passed, changes in disability category will no longer affect the amount of compensation.

Compensation for permanent disability will not be paid if the permanent disability manifests more than three (3) years after the accident.

14. Trip cancellation

The policy covers trip cancellation; situations where the insured is prevented from embarking on a trip necessitated by:

- an acute and serious illness, an accident or the death of the insured or his or her next of kin. The necessity is assessed on medical grounds.
- unexpected significant financial losses in the insured's assets in the home country, which make it

necessary for the insured to remain,

- theft of travel documents or identification, which has been reported to the police, within 24 hours of the start of the trip.

The above-mentioned next of kin of the insured include his or her husband, wife, common-law spouse, child, adopted or foster child, child of the husband/wife or common-law spouse, grandchild, parent, adoptive or foster parent, parent-in-law, parent of common-law spouse, grandparent, siblings, half-siblings, step-siblings, daughter-in-law, son-in-law or a travel companion with whom the insured has booked a trip for two.

In case of cancellation, the insured will be compensated for expenses equal to the policy limit specified in the coverage chart (section 4) due to travel, accommodation, unused services, excursions and travel at the destination which the insured has already paid and cannot get a refund. The refund or reimbursement that the insured is or would be entitled to receive from the transportation company or tour operator when the cause of the cancellation manifested will be deducted from the compensation. Travel arrangements must be stopped and the insured must cancel all travel arrangements with the transportation company or tour operator immediately when the insured becomes aware that the trip must be cancelled.

14.1 Limitations connected to trip cancellation

The policy does not cover expenses due to trip cancellation if:

- the insured does not want to travel;
- the cause of cancellation manifested before the insurance period or before the trip was booked and paid. The policy only covers expenses due to trip cancellation if the illness or injury or other cause of cancellation was sudden and unexpected and not known when the trip was booked;
- the acute illness or accident was caused by abuse of alcohol, medicinal drugs or other intoxicants;
- the expenses are incurred due to using an airline bonus system or a similar method;
- insured fails to obtain the required inoculations, vaccinations, passport or visa;
- the trip cancellation is due to pregnancy or childbirth.

15. Trip interruption

The policy covers trip interruption if the insured is forced to return home prematurely due to sudden acute illness, accident or death of insured or a next of kin. In case of trip interruption, the policy also covers a guardian's premature return to Finland if a child who is travelling with the guardian must be repatriated for necessary medical reasons. Expenses due to trip cancellation are covered up to the policy limit specified in section 4.

The above-mentioned next of kin of the insured include his or her husband, wife, common-law spouse, child, adopted or foster child, child of the husband/wife or common-law spouse, parent, adoptive or foster parent, parent-in-law, parent of common-law spouse, grandparent, grandchild, brother, sister, half-siblings, step-siblings, daughter-in-law, son-in-law, fiancé or fiancée or a travel companion with whom the insured has booked a trip for two.

Compensation for trip interruption covers:

- unavoidable additional travel and accommodation expenses due to the insured's journey home, but not meal expenses;

- unused services, excursions and travel at the destination which the insured had paid for separately in advance.

Insurance does not cover:

- additional travel or accommodation expenses or similar expenses if the trip is prolonged due to illness or accident. In case of trip cancellation, the policy does not cover expenses due to transport of vehicles to Finland;
- trip interruption, if the cause of the interruption manifested before the insurance period or before the trip was booked. The policy only covers expenses due to trip interruption if the illness or accident was sudden and unexpected and not known when the trip was booked;
- compensation for the original return trip;
- trip interruption if the insured is forced to cancel the trip but does not return to Finland.

16. Missed departure

The policy covers missed departure if the insured is unable to reach the place of departure of a booked flight in accordance with the original itinerary due to a delayed bus or train or traffic damage to a private vehicle or taxi. In case of missed departure, reasonable additional and necessary travel and accommodation expenses are also covered. Expenses due to missed departure are covered up to the policy limit specified in section 4.

The insured must acquire a written statement of the delay and reasons for the delay from the airline, Transportation Company or tour operator. Original receipts and an account of the bookings must be appended to the notification of claim. If the missed departure is due to traffic damage, the insured must submit an official's statement on the traffic damage.

Insurance does not cover:

- expenses due to missed departure, if the insured has not followed the airline's instructions for arriving to the airport and thus has not reserved enough time to arrive at or before the recommended time;
- any claims due to strikes or other labor disputes of which the insured was aware before the start of the trip.

17. Compensation for delay due to delayed flights and abandonment of a trip

17.1 Compensation for delay

The insurance cover applies to situations where the insured is, due to a delayed or overbooked flight, forced to wait for a flight that is on the itinerary for over six (6) hours. Necessary and reasonable meal expenses and, where needed, accommodation expenses, are covered up to the policy limit specified in section 4. The refund or reimbursement that the insured is entitled to receive from the transportation company or tour operator will be deducted from the compensation.

Any purchases must be made and accommodation must take place during the delay at the destination where the delay occurred.

The insured must acquire a written statement of the delay and reasons for the delay from the airline or tour operator. Original receipts and an account of the bookings and booking confirmations must be appended to the notification of claim.

17.2 Abandonment of a trip

Abandonment of a trip is covered if the insured is forced to cancel a trip due to a delay lasting more than 48 hours for reasons outside the insured's control. The policy covers the cost of the cancelled trip up to the policy limit specified in the coverage chart (section 4). The refund that the insured receives from the airline or tour operator will be deducted from the compensation.

17.3 Limitations connected to compensation for delay and abandonment of a trip

Insurance will not cover compensation for delay if:

- the flight is not a registered charter or scheduled flight,
- the delay is due to the insured failing to check in for the flight according to the airline's instructions,
- the delay is due to a strike or other industrial actions of which the insured was aware before the start of the trip, or if
- the delay is due to a grounding or similar action announced by an aviation authority or another authority before the start of the trip.

18. Luggage compensation

Bronze – level does not cover this section

18.1 Luggage compensation

The policy covers up to the policy limit specified in section 4 damaged or lost normal luggage, either taken on the trip or purchased during the trip, due to a sudden or unexpected event. It also covers the replacement of the documents listed below. Normal luggage means utility articles carried with and accompany the traveler. Coverable documents include passports, identification cards, driving licenses and vehicle registrations as well as credit and ATM cards. For these documents, the policy covers the renewal expenses of the cards.

Insurance will cover up to the €300 limit for the theft of cash, or traveler's cheques, if insured can give evidence that has owned them and evidence of their value. The most compensated for each insured child if money is stolen from under 16 years of age of age is €100

18.2 Compensation amount

The compensation for items that are less than one (1) year old and in good condition is based on the purchase price of equivalent items. Otherwise compensation will be determined based on the value of the item at the time of occurrence, in which case the following age reductions is deducted from the purchase price based on the item's age starting from the second year of use:

Age reduction for items per year %:

<i>digital cameras</i>	20
<i>other electronic and optical equipment</i>	10
<i>navigators</i>	20
<i>bicycles, motor-driven tools and machines</i>	10
<i>IT devices (computers),</i>	

<i>mobile phones and their accessories and other data devices</i>	40
<i>camping and fishing equipment</i>	20
<i>clothes, accessories, footwear, sportswear and sports equipment</i>	25
<i>Suitcases and handbags</i>	25
<i>Children's push chairs</i>	25

For valuable items the maximum cover is mentioned at the section 4. Valuable items are: Photographic, audio, video and electrical equipment of any kind (including laptops, CDs, MDs, DVDs video and audio tapes), mobile phones, telescopes and binoculars, antiques, jewellery, watches, furs, leather goods, animal skins, silks, precious stones, articles made of or containing gold, silver or platinum.

Age reduction does not apply to repair costs based on invoices. Damaged items will be replaced mainly by having them repaired. If the repair costs exceed the value at the time of occurrence determined according to the above, the insurer will compensate for value at the time of occurrence.

18.3 Limitations connected to luggage compensation

The following items are not considered baggage:

- cheques, travel tickets or receipts;
- spectacles or contact lenses, sunglasses, dentures, hearing aids or other personal aid equipment;
- motor vehicles or motor-driven equipment, sleeping caravans and other trailers, watercraft or aircraft, or parts or equipment for the above;
- work tools, computer software and files or parts thereof, fax machines and copiers;
- manuscripts, collections or parts thereof;
- merchandise, tool samples, promotional materials, commercial and educational films and recordings, photographs, drawings or programmed diskettes;
- animals or plants;
- household effects in transit and freight;
- goods and equipment that have been stored at the destination for over three (3) months;
- windsurfing boards and sails;
- property or items that were rented or borrowed during the trip or damage thereto.

The policy does not cover damage caused by:

- losing or forgetting items;
- damage due to normal use of luggage items;
- misuse of means of payment, such as credit or ATM cards;
- losing and forgetting cash or credit cards or other means of payment;
- financial losses connected to illicit use of mobile phones;
- damage due to normal use, abrasion, scratching or inadequate protection of items;
- actions of officials;
- repair, cleaning or other treatment of items;
- gradual damage due to weather conditions or humidity;
- pressure waves from a supersonic aircraft;
- damage to bicycles, skis or other sports equipment

- from appropriate use;
- damage to winter sport equipment, if cover has not been extended to include this;
- property or items that were rented or borrowed during the trip.

Insurance will not cover damages that are compensated based on a special act, warranty or another insurance policy. In addition, insurance will not cover theft that has not been reported to the local police authorities within 24 hour or, if this is not possible, to the tour operator, transportation company or hotel.

18.4 Safety instructions and their importance

The safety instructions are aimed at preventing damage and minimizing the scope of damage. Intentional or larger than minor failure to follow the safety instructions may lead to reduced compensation or refusal of compensation.

18.4.1 Public spaces

The insured must not leave luggage unattended in public spaces such as traffic stations, market places, restaurants, stores and other commercial enterprises, lobbies of accommodation businesses, beaches, sports fields, public transport and public tourist attractions and sites. If bicycles, skis, snow boards or other sports equipment must be left outdoors or in spaces that are in public use without supervision, they must be locked in racks reserved for this purpose or locked to another appropriate fixed object.

18.4.2 Indoor and storage facilities

Items and equipment that are kept in a hotel room, ship cabin or other equivalent accommodation and whose value exceeds €350, must be kept in a separately locked space if this is possible considering the item's purpose, size and conditions. It is not allowed to store items and equipment that are worth more than €200 euro in a tent or dormitory accommodation unless arrangements have been made for security.

18.4.3 Vehicles and their equivalents

On motor vehicles, caravans, boats or equivalent vehicles, property must be kept in a locked compartment. A ski box, side bag or tank bag is not an appropriate locked compartment. If luggage is kept in the boot of an estate car or equivalent vehicle, the luggage must be covered.

18.4.4 Other instructions

The insured must follow the instructions for use issued by the manufacturer, retailer or importer. The insured must also follow the instructions and packing regulations of the transportation company. Liquids and staining and corrosive substances must be transported separately and packed so that they cannot contaminate other luggage items. Fragile and easy-to-steal items, such as laptop computers, tablets, cellular phones and jewelry, must be carried in hand luggage in public transport.

18.5 Compensation for delayed luggage

In case of delayed luggage, insurance will compensate expenses arising from the purchase or rental of necessities up to the policy limit specified in section 4 if registered/checked-in luggage is over six (6) hours late. Necessities may include sanitary equipment and clothes, for example. The purpose of the trip will be considered in the assessment of the necessity of the items acquired. Compensation unconditionally requires a certificate from the transportation company regarding the delayed luggage and original receipts for the purchase or rental of personal items. The primary liability always lies with the transportation company, to whom the insured must always present the claim first. The payment of compensation requires that:

- the luggage must have been left with the airline to transport as accompanying luggage;
- the insured has undertaken reasonable measures in order to reclaim the luggage;
- the delayed luggage has been reported to the appropriate transportation company without delay and the transportation company's certificate regarding the delayed luggage and a certificate about its return have been submitted with the claim;
- the necessities were purchased or rented before the luggage was reclaimed;
- the insured has submitted original receipts for the purchased or rented necessities.

18.5.1 Limitations connected to the compensation for delayed luggage

There is no compensation for delayed luggage, if:

- the flight is not registered in the global computer reservations system;
- the luggage has been confiscated by Customs or another authority;
- the delay is due to a strike or other industrial actions of which the insured was aware before the start of the trip;
- the delay is due to a grounding or similar action announced by an aviation authority or another authority before the start of the trip;
- the luggage is delayed on the return trip.

19. Hospital benefit

Insurance will compensate up to the overall limit shown on the section 4 if, after an accident or illness that is covered under part 5 (Travel-time illness and travel accident) of this insurance, insured go into hospital as an in-patient outside Finland. Insurance will cover up to € 10 for each complete 24-hour period whilst insured is in hospital.

20. Hijack

Insurance will compensate up to €40 for each full 24-hour period (up to the limit shown on the section 4) if the aircraft or sea vessel in which insured is travelling is hijacked on the original, pre-booked, outward or return journey for a period over 24 hours.

Insurance does not cover for any claim resulting from insured acting in a way which could cause a claim under this section. It is a condition of the cover provided under this section that insured must give a written statement from an appropriate authority confirming the hijack and how long it lasted.

21. Legal aid

Insurance will compensate legal advice and aid arranged by SOS International up to the policy limit specified in section 4 if the insured has been involved in a traffic accident and has consequently been arrested. Compensation of the services above requires that AIG has approved the measures before the service was arranged and initiated. SOS International has the right to choose the most appropriate course of action for each loss event.

22. Liability compensation

Bronze – level does not cover this section

Personal liability compensation means that insurance will compensate, up to the policy limit specified in section 4, damage to property or people for which the insured is liable

according to applicable law if the damage is caused by the actions of the insured during the insurance period. In addition, AIG will investigate the grounds and amount of the presented claims and handle the trial if the claim leads to court proceedings.

22.1 Limitations concerning liability compensation

The policy does not cover damage caused

- to the insured or his/her family member, relative or travel companion;
- by assault, fight or another crime or its attempt;
- to property that was in the insured's possession, including borrowed or rented property, when the act or failure to act that caused the damage occurred;
- by possession or use of a motor vehicle, motor-driven equipment or a ship or boat or aircraft that requires registration;
- by spreading a communicable disease;
- by a fine or similar consequence.

Insurance does not cover:

- damages caused intentionally by the insured;
- damages caused by the insured in professional, commercial and industrial or wage-earning activities;
- damages whose claims provision is based on an agreement, commitment, promise or warranty;
- damages for which the insured is liable as the owner or possessor of a property;
- damages for parts which are compensated from another valid third party insurance of the insured.

22.2 Compensation of loss

The policy covers damages up to the policy limit specified in section 4. Damages caused by the same event or situation are considered a single loss event. If there is more than one person jointly liable for damages, the policy covers up to the insured's share of the overall damages determined by the number of persons who are liable for damages.

22.3 Claim investigation and legal proceedings

AIG will investigate whether the insured is liable for damage, negotiate with the claimant and pay the compensation required by the damages. The insured must give AIG the opportunity to assess the amount of damages and reach an amicable settlement. If a loss event leads to legal proceedings, the insured must immediately notify AIG. AIG is entitled to make decisions regarding the legal proceedings. AIG is entitled not to cover the expenses of legal proceedings if the insured has not informed AIG of them. If the insured compensates for damages, makes a settlement or approves a claim without AIG's advance approval, AIG will not be bound unless the compensation sum and grounds are obviously correct. If AIG is ready to make a settlement with the injured party and the insured refuses, AIG is not liable for any costs incurred after this and will not conduct any further investigation on the matter.

23. Winter Sport benefit

Bronze – level does not cover this section

Medical expenses are covered under this section for accidents caused by exercising winter sports only if cover has been extended to include this. For single trip policies this cover is only valid if appropriate additional premium is paid. If you have purchased Annual Multi trip policy winter sport benefit cover is included automatically.

Winter sport is defined as all forms of downhill skiing, cross-country skiing and snow boarding in marked slopes, as well as off-piste skiing (only when accompanied by an official guide), and sledging.

23.1 Winter sport equipment

Insurance will cover up to the maximum limit shown in section 4 (with a limit for any one item, set or pair) if your winter sports equipment is damaged, stolen, lost or destroyed on your trip. Depending on the age of the equipment, we may make a deduction for wear, tear and loss of value.

Winter sport equipments are skis, poles, boots and bindings or snow boards.

What is not covered for:

- The first €50 of each claim for each insured person;
- any loss or theft which you do not report to the police within 24 hours of discovering it and for which you do not get a written report;
- Winter sports equipment you leave unattended in a public place;
- Any loss, theft or damage to winter sports equipment carried on a vehicle roof rack;
- Theft, loss or damage to winter sports equipment during a journey unless you report this to the carrier and get a property irregularity report at the time of the loss;
- Loss or theft or damage of winter sports equipment while not in your control or in the control of any person other than an airline or transport company.

23.2 Slope closure

(This cover is valid only for the period 15 December to 15 April).

Insurance covers up to the maximum limit shown on the section 4 if, as a result of not enough snow in your pre-booked holiday resort, all lift systems are closed for more than 24 hours. We will pay for either:

1. The cost of transport to the nearest resort up to €20 for each full 24-hour period; or
2. Up to €30 for each full 24-hour period if you are unable to ski and there is no other ski resort available.

It is a condition of the cover provided under this section that:

- You get a written statement from the management of the resort confirming the reason for the closure and how long it lasted;
- The pre-booked holiday resort where you are staying is at least 1000 meters above sea level; and
- If you buy this insurance within 14 days of the date you plan to leave, coverage is subject to confirmation that no ski-lifts or ski-schools in your pre-booked resort were closed at the time the policy was issued.

23.3 Avalanche cover

Insurance will cover up to the maximum limit shown on the section 4 for reasonable extra travel and accommodation expenses that you need to pay if your pre-booked outward or return journey is delayed for more than 12 hours from your scheduled arrival time because of an avalanche.

It is a condition of the cover provided under this section that you get a written statement from the appropriate authority

confirming the reason for the delay and how long it lasted. It is not covered for the first €50 of each claim, for each insured person.

23.4 Ski hire

Insurance will cover €25 for each full 24-hour period for the costs of hiring other ski equipment up to the maximum limit shown on the section 4 if:

- The skis that you own are lost during the flight or delayed during your trip for over 12 hours from the realized landing time of the airplane; or
- The skis that you own are lost or damaged during the course of your trip.

What you are not covered for:

- Any loss due theft which you do not report to the police within 24 hours of discovering it and get a written report.
- Any loss due to theft, delay, loss of or damage to your ski equipment while it is transported unless you report this without delay to the carrier and get a property irregularity report.

24. General limitations concerning all types of coverage

24.1 War

AIG is not liable for damages caused by war or armed conflict, revolution, civil commotion or use of military force.

24.2 Nuclear damage and radioactive, biological and chemical weapons

The policy does not cover loss events caused by:

- nuclear damage as specified in the Nuclear Liability Act, regardless of where the nuclear damage occurs;
- the use or emissions of radioactive substances which directly or indirectly lead to nuclear reaction, radioactive radiation or pollution;
- the spread, use or emissions of toxic biological or chemical substances when they are used intentionally in an act of terrorism.

24.3 Intent and gross negligence

If the insured has caused a loss event intentionally or due to gross negligence, AIG's liability may be reduced or compensation may be refused completely in accordance with what is reasonable for the situation.

24.4 Other limitations connected to all types of coverage

The policy does not cover loss, injury, damage or legal liability;

- Any loss if insured is already had the 70th birthday before the trip;
- Any loss on annual travel insurance if loss has occurred after the first 31 days and trip last longer than 31 days;
- sustained directly or indirectly by any individual or entity identified on any applicable government watch list as a supporter of terrorism, narcotics or human trafficking, piracy, proliferation of weapons of mass destruction, organized crime, malicious cyber activity, or human rights abuses;
- the loss event is caused by participation in violent industrial action, insurrection or other violent riot in a public space;
- the insured is participating in active military, police, militia or peacekeeper operations or practices thereof;
- the insured is carrying out duties assigned to flight crew or connected to flight in an aviation accident;
- the loss event is caused by an earthquake, volcanic eruption,

flood, tsunami, hurricane, tornado or wildfire, landslide, avalanche, or any other natural catastrophe;

- the insured is participating in criminal activity;
- the sudden illness was a result of abuse of alcohol or medicine or use of intoxicants;
- the insured is involved in a fight, excluding self-defense;
- the claim submitted by the insured is due to new laws or instructions specified by Customs or other authorities;
- the claim arise from or as a result of civil commotion, strike, lock-out, blockade, riot of any kind, action of government of any country or threat of such event;
- any claim arising from the tour operator, airline or any other company, firm or person becoming insolvent, or being unable or unwilling to fill any part of their obligation to

insured;

- Damages compensated legally by motor insurance or an insurance policy of the employer.

The Insurer shall not be deemed to provide cover and the Insurer shall not be liable to pay any claim or provide any benefit hereunder to the extent that the provision of such cover, payment of such claim or provision of such benefit would expose the Insurer, its parent company or its ultimate controlling entity to any sanction, prohibition or restriction under United Nations resolutions or the trade or economic sanctions, laws or regulations of the European Union or the United States of America.

Compensation procedure

25. Compensation procedure

25.1 Loss event procedure

The claimant must submit to AIG all documents and information necessary to determine the insurer's liability. Travel insurance claims must be submitted as soon as possible on a signed form of the insurer. AIG may transfer the information to its centralized system and store personal data in accordance with the Personal Data Act and privacy protection regulations.

In case of injury the insured shall first meet minor costs themselves, such as normal medical treatments and medical examinations, and then subsequently apply for indemnity from AIG Europe S.A. Please hold all original medical certificates, receipts and documents, as they might be requested by AIG.

In case of flight delays, report from the airline in question is required. In luggage claims the reclamation made to airline, tour operator or hotel must be presented, and/or offence report to the police. AIG may request other information and documents where needed.

Notification of claim can be done via AIG online tool: www.aig.fi/en/claim-notification-online or by printing the notification form from www.aig.fi/en/claims and by posting it with all necessary attachments to AIG (without postal fee):

AIG Europe S.A. Finland branch
Tunnus 5008951
00003 VASTAUSLÄHETYS

Claims must be made within one (1) year of the date claimant became aware:

- of the valid insurance;
- loss event and the consequences thereof.

Claims must be made within ten (10) years of the date of the loss event. If claims are not made within this period, claimant loses all rights to compensation.

If help is needed how to apply a claim, insured may contact AIG customer service at **+358 20 350 550**, open Mon-Fri 9 AM to 9 PM and Sat 10 AM to 4 PM.

During the travel in case of urgency, please contact Emergency Assistant Service SOS International:

Emergency Assistant Service:

SOS International AS
Copenhagen, Denmark
Tel.: +45 38 48 93 38
Fax: +45 70 10 50 56
E-mail: sos@sos.dk
(24h service in Finnish, Swedish and English)

25.2 Compensation procedure for medical expenses

The insured must pay the medical expenses and apply for compensation in accordance with the Sickness Insurance Act. Compensation in accordance with the Sickness Insurance Act must be applied for from the Social Insurance Institution of Finland (Kela) within six (6) months of the payment of the medical expenses. The claimant must submit to AIG the original Kela certificate of the compensation it has paid and

copies of the receipts and documents submitted to Kela. The original receipts for which the insured has not received compensation based on the Sickness Insurance Act or any other legislation must be delivered to AIG. If the insured has lost the right to compensation in accordance with the Sickness Insurance Act, AIG will deduct the part that would have been paid in accordance with the Sickness Insurance Act from the compensation.

25.3 Notification of claim

A notification of claim must include the following information and documents:

- policy number;
- short description of the loss event;
- ticket or other type of transport receipt;

Medical expenses:

- appropriately dated and signed doctor's certificate, which indicates the exact description of the illness or injury;
- original receipts for the acquired medical and medicinal expenses and service charges and prescriptions;

Repatriation to Finland due to travel-time illness or travel accident:

- contact SOS International.

Repatriation expenses of a child travelling with the insured:

- contact SOS International.

Repatriation of remains:

- contact SOS International.

Accidental death:

- death certificate and any post-mortem report and documents specifying beneficiaries (e.g., inventory of the estate, genealogy);
- any record of a police investigation.

Permanent disability due to accidental injury:

- description of the loss even and any witnesses and their contact information;
- appropriately dated and signed doctor's certificate which indicates the exact description of the injury;
- the date of the medical examination and the doctor's contact information.

Cancellation or interruption of a trip:

- appropriately dated and signed doctor's certificate that includes an exact description of the illness or injury or another type of certificate;
- a certificate of refund or compensation received from the transportation company or tour operator;
- original receipts of additional expenses;
- in case of death, a death certificate.

Missed departure:

- the transportation company's certificate regarding the missed departure;
- original receipts of transport and accommodation expenses;

Compensation for delay – flight or another public vehicle

- the transportation company's certificate regarding the missed departure;
- original receipts of meal and accommodation expenses;

Loss of luggage:

- description of the lost luggage items;
- complaint to the transportation company, tour operators or hotel and/or report of an offence to the police;
- in case of delayed luggage, the transportation company's certificate of the delay and a certificate of the return of the luggage;
- original receipts of purchased or rented necessities.

Legal aid:

- contact AIG or SOS International.

Liability loss:

- contact AIG or SOS International.

AIG may request other information and documents where needed. If the insured gets a medical examination at the request of the insurer, the insurer will compensate the insured for the incurred expenses. In case of death benefits, AIG is entitled to require a post-mortem examination, the expenses of which will be paid by AIG.

25.4 Fraudulent information

If the insured gives fraudulent statements or hides information that would be relevant to compensation for damages, the compensation may be reduced or refused completely.

25.5 Force majeure

The policy does not cover losses due to war, warlike conditions, insurrection, civil commotion or other similar events.

25.6 Procedure if the insured is dissatisfied with claims handling

If the insured is dissatisfied with the insurer's decision on a claim, the insured must always first contact the claims handler. The insured may also contact the Finnish Financial Ombudsman Bureau or the Finnish Competition and Consumer Authority, which issues recommended settlements based on consumer protection legislation.

Finnish Financial Ombudsman Bureau

Porkkalankatu 1
00180 Helsinki
Tel: 09-6850 120
Fax: 09-5850 1220
email: info@fine.fi

Finnish Competition and Consumer Authority

Hämeentie 3
PL 306
00531 Helsinki
Tel: 029 566 5200
Fax: 029 566 5249
email: kril@oikeus.fi

26. How we use personal information

AIG is committed to protecting the privacy of customers, claimants and other business contacts.

"Personal Information" identifies and relates to you or other individuals (e.g. your partner or other members of your family).

If you provide Personal Information about another individual, you must (unless we agree otherwise) inform the individual about the content of this notice and our Privacy Policy and obtain their permission (where possible) for sharing of their Personal Information with us.

The types of Personal Information we may collect and why

Depending on our relationship with you, Personal Information collected may include: contact information, financial information and account details, credit reference and scoring information, sensitive information about health or medical conditions (collected with your consent where required by applicable law) as well as other Personal Information provided by you or that we obtain in connection with our relationship with you. Personal Information may be used for the following purposes:

- Insurance administration, e.g. communications, claims processing and payment;
- Make assessments and decisions about the provision and terms of insurance and settlement of claims;
- Assistance and advice on medical and travel matters;
- Management of our business operations and IT infrastructure;
- Prevention, detection and investigation of crime, e.g. fraud and money laundering;
- Establishment and defence of legal rights;
- Legal and regulatory compliance (including compliance with laws and regulations outside your country of residence);
- Monitoring and recording of telephone calls for quality, training and security purposes;
- Marketing, market research and analysis.

Sharing of Personal Information

For the above purposes Personal Information may be shared with our group companies and third parties (such as brokers and other insurance distribution parties, insurers and reinsurers, credit reference agencies, healthcare professionals and other service providers). Personal Information will be shared with other third parties (including government authorities) if required by laws or regulations. Personal Information (including details of injuries) may be recorded on claims registers shared with other insurers. We are required to register all third party claims for compensation relating to bodily injury to workers' compensation boards. We may search these registers to prevent, detect and investigate fraud or to validate your claims history or that of any other person or property likely to be involved in the policy or claim. Personal Information may be shared with prospective purchasers and purchasers, and transferred upon a sale of our company or transfer of business assets.

International transfer

Due to the global nature of our business, Personal Information may be transferred to parties located in other countries (including the United States, China, Mexico Malaysia, Philippines, Bermuda and other countries which may have a data protection regime which is different to that in your country of residence). When making these transfers, we will take steps to ensure that your Personal Information is adequately protected and transferred in accordance with the requirements of data protection law. Further information about international transfers is set out in our Privacy Policy (see below).

Security of Personal Information

Appropriate technical and physical security measures are used to keep your Personal Information safe and secure. When we

provide Personal Information to a third party (including our service providers) or engage a third party to collect Personal Information on our behalf, the third party will be selected carefully and required to use appropriate security measures.

Your rights

You have a number of rights under data protection law in connection with our use of Personal Information. These rights may only apply in certain circumstances and are subject to certain exemptions. These rights may include a right to access Personal Information, a right to correct inaccurate data, a right to erase data or suspend our use of data. These rights may also include a right to transfer your data to another organisation, a right to object to our use of your Personal Information, a right to request that certain automated decisions we make have human involvement, a right to withdraw consent and a right to complain to the data protection regulator. Further information about your rights and how you may exercise them is set out in full in our Privacy Policy (see below).

Privacy Policy

More details about your rights and how we collect, use and disclose your Personal Information can be found in our full Privacy Policy at: <https://www.aig.fi/en/privacy> or you may request a copy by writing to: AIG Europe S.A., Kasarmikatu 44, 00130 Helsinki or by email at: tietosuoja.fi@aig.com.

27. Policy termination

The policy does not include a right to give notice if the insurance period is shorter than 30 days. If the insurance period is longer than 30 days, AIG will return the insurance premium to the insured if the policy is terminated in writing

before the start of the trip. If the insured terminates the policy after the trip has started, AIG is entitled to the insurance premium for the time that the insurance has been valid, and AIG will return the unused part of the insurance premium to the insured.

Policy termination in written:

AIG Europe S.A.

Kasarmikatu

00130 Helsinki

Sposti: travelguardfinland@aig.com

28. Advance information in distance selling

Advance information in distance selling can be read via this link: www.aig.fi/ennakkotiedot. Advance information is provided in Finnish as described in Finland Consumer Protection Provision (38/1978).

29. Applicable law

This policy is subject to these terms and conditions as well as Finnish Law.

30. District court

If the claimant is dissatisfied with AIG's decision, he/she may bring action against AIG. The action may be brought in the district court in the claimant's domicile in Finland, in the domicile of AIG or in the place of loss in Finland, unless otherwise prescribed by Finland's international agreements. Action against AIG's indemnity decision must be brought within three years of the claimant being informed in writing about AIG's decision and the time limit. After the time limit has expired, the right to bring action ceases

Information on the insurance company

1. Insurance company

This policy is issued by AIG Europe S.A. Finland branch (register number is 2922692-7) ('AIG'), address Kasarmikatu 44, 00130 Helsinki. AIG Europe S.A. Finland branch is a local branch of the international insurance organization AIG Europe S.A., an insurance undertaking with R.C.S. Luxembourg number B 218806. AIG Europe S.A. has its head office at 35 D Avenue John F. Kennedy, L-1855, Luxembourg, <http://www.aig.lu/>.

2. Who regulates us?

AIG Europe S.A. Finland branch is authorized and regulated by the Financial Supervisory Authority. If you wish, you can verify it at the Financial Supervisory Authority website www.finanssivalvonta.fi or by contacting the Financial Supervisory Authority by telephone at +358 10 83151. The Financial Supervisory Authority is the authority for supervising Finland's financial and insurance sectors, operating independently under the Bank of Finland. The duties of the Financial Supervisory Authority include supervising that insurance companies operating in Finland comply with legislation and good practice.

Contact details for the Financial Supervisory Authority

Snellmanninkatu 6, PL 103, 00101 Helsinki

Tel: 010 83 151

www.finanssivalvonta.fi

AIG Europe S.A. is authorized by the Luxembourg Ministère des Finances and supervised by the Commissariat aux Assurances 7, boulevard Joseph II, L-1840 Luxembourg, GD de Luxembourg, Tel.: (+352) 22 69 11 - 1, caa@caa.lu, <http://www.caa.lu/>.

3. AIG Customer Service and insurance claims:

- Via AIG internet pages: www.aig.fi/en/claim-notification-online
- By mail: AIG Europe S.A., Customer Service, Kasarmikatu 44, FI-00130 Helsinki, FINLAND
- By telephone: +358 203 50550 (Mon–Fri 9am–9pm, Sat 10am–4pm)
- By e-mail: travelguardfinland@aig.com

Claims handling if a notification of claim has already been filled in:

- By mail: AIG Claims Department/AIG Europe S.A., Kasarmikatu 44, FI-00130 Helsinki, FINLAND
- By e-mail: korvauspalvelu@aig.com

If you are dissatisfied with our service, please contact AIG Customer Service first. If you are dissatisfied with a decision, you may also contact the Finnish Financial Ombudsman Bureau or the Finnish Competition and Consumer Authority, which issues recommended settlements.

Finnish Financial Ombudsman Bureau

Porkkalankatu 1, 00180 Helsinki

Tel: 09-6850 120 / Fax: 09-5850 1220

email: info@fine.fi

Finnish Competition and Consumer Authority

Hämeentie 3, PL 306, 00531 Helsinki

Tel: 029 566 5200 / Fax: 029 566 5249

email: krii@oikeus.fi

The dispute between the policyholder and the insurance company is ultimately settled in The General Court. The action may be brought in the district court in the claimant's domicile in Finland or in District Court of Helsinki

AIG Europe S.A. Finland branch

Register number 2922692-7

Kasarmikatu 44

FI-00130 Helsinki

Finland

www.aig.com/fi

AIG Europe S.A. sivuliike

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Helsinki

FIN-00130

Tel: 020 7010 100

Fax: 020 7010 180

American International Group, Inc. (AIG) is a leading international insurance organization serving customers in more than 130 countries and jurisdictions. AIG companies serve commercial, institutional, and individual customers through one of the most extensive worldwide property-casualty networks of any insurer. In addition, AIG companies are leading providers of life insurance and retirement services in the United States. AIG common stock is listed on the New York Stock Exchange and the Tokyo Stock Exchange.

AIG is the marketing name for the worldwide property-casualty, life and retirement, and general insurance operations of American International Group, Inc. For additional information, please visit our website at www.aig.com. Products and services are written or provided by subsidiaries or affiliates of American International Group, Inc. In Europe, the principal insurance provider is AIG Europe S.A. This material is for information purposes. Not all products and services are available in every jurisdiction, and insurance coverage is governed by the actual terms & conditions of insurance set out in the policy or in the insurance contract. Certain products and services may be provided by independent third parties. Insurance products may be distributed through affiliated or unaffiliated entities. [Certain property-casualty coverage may be provided by a surplus lines insurer. Surplus lines insurers do not generally participate in state guaranty funds and insured are therefore not protected by such funds.]

AIG Europe S.A. is an insurance undertaking with R.C.S. Luxembourg number B 218806. AIG Europe S.A. has its head office at 35 D Avenue J.F. Kennedy, L-1855, Luxembourg, <http://www.aig.lu/>. AIG Europe S.A. is authorized by the Luxembourg Ministère des Finances and supervised by the Commissariat aux Assurances 7, boulevard Joseph II, L-1840 Luxembourg, GD de Luxembourg, Tel.: (+352) 22 69 11 - 1, caa@caa.lu, <http://www.caa.lu/>.



Bring on tomorrow