TRAVEL INSURANCE PLAN B

The guard.me Global Travel Insurance Plan B (with no trip cancellation) consists of two components:

1) guard.me Global Travel Insurance Policy Underwritten by Old Republic Insurance Company of Canada

Please see attached guard.me Global Travel Insurance Policy commencing on page 2 of this document for complete descriptions of the benefits (including benefit limits), terms, conditions, limitations and exclusions for the plan purchased.

2) guard.me International Student Third Party Liability Rider Underwritten by Unica Insurance Inc.

<table>
<thead>
<tr>
<th>BENEFIT</th>
<th>MAXIMUM</th>
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<tbody>
<tr>
<td>Third Party Liability</td>
<td>$1,000,000</td>
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Please see guard.me International Student Third Party Liability Rider attached to the guard.me Global Travel Insurance Policy on page 23 for complete descriptions of the benefits, terms, conditions, limitations and exclusions.

BEFORE YOU DEPART

Take the time to read your policy and know what you are covered for. Pay special attention to bold words. They have a specific meaning which is explained in the Definitions section of this policy on page 17. If you have any questions, contact guard.me.

This policy covers only the specific situations, events and losses mentioned in this document and only under the conditions we describe.

This policy is secondary to all other sources of coverage. Any benefits payable under this policy are in excess of any other coverage you may have with any other insurance company or any other source of recovery, including any credits or travel vouchers you are entitled to.

10 DAY RIGHT TO EXAMINE

You may cancel this policy within 10 days of purchase for a full refund if you have not departed on your covered trip and there is no claim in process.

IMPORTANT NOTICE

- Travel insurance is designed to cover losses arising from sudden and unforeseeable circumstances. It is important that you read and understand your policy before you travel as your coverage is subject to certain limitations, conditions or exclusions.

- Pre-existing condition exclusions may apply to medical conditions and/or symptoms that existed prior to your covered trip. Check page 4 to see how these apply to your policy and how they relate to your departure date, date of purchase or effective date.

- In the event of an injury or sickness, prior medical history will be reviewed when a claim is reported.

- This policy provides travel assistance and you are required to notify the emergency assistance provider prior to treatment. This policy limits benefits should you not contact the assistance provider within the specified time period.
guard.me Global Travel Insurance is available to persons under 65 years of age on the departure date, travelling outside their home country as a student, faculty, teacher, chaperone, participant in educational/business/cultural exchanges, along with their spouse, parents and dependents over the age of 15 days and under 19 years.

If you do not meet the requirements and conditions listed below, your insurance is void and the company’s liability is limited to a refund of the premium paid:

- You must be insured for the full duration of the covered trip.
- The policy must be purchased prior to your departure from Canada.
- Coverage is effective throughout the world except in your home country.
- You must not have a medical condition for which a physician has advised you against travel prior to your effective date.
- You must not have been diagnosed with a terminal sickness prior to your effective date.
- The covered trip must not exceed 365 days.
- Any child born during the covered trip is not entitled to coverage under this policy.

Coverage is not provided for any claims arising from:

a) a heart condition involving the taking of nitroglycerine more than once per week for the relief of angina;
b) a lung condition treated with home oxygen or the taking of oral steroids (prednisone or prednisolone).

Effective Date – When Coverage Begins

Your coverage begins on the departure date when you leave Canada on your covered trip.
When Coverage Ends

Your Coverage ends on the earliest of the following events:
1. The date and time you cancel your insurance prior to departure;
2. When you cancel your covered trip;
3. On the date you return to Canada;
4. The date your policy expires as shown on your policy confirmation document or application for this insurance; or
5. The date you cease to be eligible for coverage under this policy.

Your coverage will not end if you temporarily return to Canada or your home country to attend a funeral or get to the bedside of a hospitalized family member. In such a case, your policy will remain in effect up to your original return date except we will apply the pre-existing condition exclusion based on your new departure date upon continuing your covered trip.

Automatic Extension of Coverage

Your insurance will automatically be extended beyond your scheduled return date as shown on your policy confirmation document or application for this insurance if:
1. Your scheduled common carrier is delayed or you are delayed due to circumstances beyond your control, coverage will be extended for up to 72 hours; or
2. You, your travelling companion or a family member travelling with you are admitted to hospital on or prior to your scheduled return date. Coverage will be extended for the duration of the hospital stay and for up to 5 days after discharge from the hospital while outside Canada; or
3. You, your travelling companion or a family member travelling with you are unable to travel due to a medical reason that does not require hospitalization. Coverage will be extended for up to 3 days and must be documented by a physician at your destination.

Extending Coverage After Departure

If you decide to extend your covered trip after departure, call guard.me. We will extend your coverage under this policy beyond your scheduled return date, as long as:
1. You have not experienced an injury or sickness, or have not had medical treatment during your covered trip;
2. Coverage under this policy is in force at the time you request an extension; and
3. You pay any additional required premium for such extension.

In all other circumstances, coverage may be extended, but only at our discretion. In no event shall coverage be extended for a period exceeding 365 days from your original departure date.

Failure to make medical information known will render this coverage extension null and void.

How Do You Become Insured

You become insured and this document becomes an insurance policy:
- When you are named on a completed insurance application; and
- When you pay the required premium on or before your coverage effective date.

TRAVEL ASSISTANCE

When It Applies

If you require emergency medical assistance or other help while travelling on your covered trip.

What We Provide – 24/7

a) Medical Assistance
b) Medical Evacuation and Repatriation Assistance
c) Emergency Return Home Travel Assistance
d) Travel Arrangement Assistance
e) Lost or Delayed Baggage or Document Assistance
f) Legal or Translation Assistance

You will be responsible or any related charges not covered by the policy.

What To Do When You Need Assistance

Have your policy number or policy confirmation with you at all times. You can contact our assistance provider at the telephone numbers listed below. Access is available 24 hours per day, 365 days per year. If you cannot successfully place a collect call to the emergency assistance provider as instructed, please dial direct and submit the charges incurred to make the call along with your claim documents.

USA & Canada 1-800-334-7787
Direct Dial Collect 1-905-667-0587
Email: assistance@oldrepubliccanada.com

When contacting our assistance provider, please provide your name your policy number, your location and the nature of the emergency. You will be referred to the most appropriate service provider for your situation. Where a claim is payable, we will arrange, to the extent possible, to have any medical expenses billed directly to the company.

Limitation on Emergency Assistance Provider Services

The company and/or the claims administrator and/or the emergency assistance provider will use its best efforts to provide services during any event, but reserves the right to suspend, curtail or limit services in any area or country if the need arises.

The emergency assistance provider's obligation to provide services described in this policy is subject to the terms, conditions, limitations and exclusions set out in this policy. The medical professional(s) suggested or designated by the company, claims administrator or the emergency assistance provider to provide services according to the benefits and terms of this policy are not employees of the company, the claims administrator or the emergency assistance provider. Therefore, the company, the claims administrator and the emergency assistance provider shall not be held responsible or liable for any negligence or other acts or omissions on their part, nor for the availability, quality, quantity or results of any medical treatment or service you may receive or your failure to obtain or receive any medical treatment or service.

EMERGENCY MEDICAL

When It Applies

If you experience a medical emergency while on your covered trip.
What We Cover

1. **Emergency medical expenses:** as listed below and ordered or prescribed by a physician as medically necessary for diagnosis or treatment of your emergency sickness or injury:
   
   a) the services of a physician, surgeon or in-hospital duty nurse;
   
   b) Hospital room and board charges up to the semi-private room rate. This will include expenses for a cruise ship cabin or hotel room, not already included in the cost of your covered trip, if recommended as a substitute for a hospital room for recovery of an injury or sickness;
   
   c) transportation furnished by a professional ambulance company to and from a hospital;
   
   d) up to $50 each way if a local taxi service is required to get you to and from the nearest medical service provider for a minor emergency;
   
   e) Your emergency evacuation from a remote location to the nearest appropriate hospital that can provide the necessary emergency medical treatment as determined and arranged by our emergency assistance provider;
   
   f) diagnostic procedures, laboratory procedures and treatment, subject to prior approval by us;
   
   g) medical equipment purchased or rented for therapeutic purposes subject to prior approval by us;
   
   h) prescription medications required to treat any emergency medical condition or injury, which are prescribed by a physician and dispensed by a licensed pharmacist (maximum 30 day supply);
   
   i) one follow-up visit following emergency treatment or one follow-up visit following hospital discharge for an emergency that is covered by this policy. The follow-up visit must be recommended by a physician at the time of discharge and take place within the required time frame recommended for an initial follow-up visit. The cost of this follow-up visit is limited to $500.

   • With respect to all emergency medical expenses, you or someone acting on your behalf are required to immediately contact our 24 hour assistance line at the telephone numbers provided on page 6 of this policy before admission to hospital or within 24 hours after a life or organ-threatening emergency. Failure to do so will result in you being responsible for 30% of any eligible expenses incurred.

   • The company reserves the right to return you to your home country before any treatment or following emergency treatment for sickness or injury, if the medical evidence obtained from our medical advisor and your local attending physician confirms you are able to return to your home country without endangering your life or health.

   If you elect not to return to your home country following the company’s recommendation to do so, any further expenses related to the emergency will not be covered by this policy and all benefits will end.

2. **Prescription drugs:** up to $50 for prescription drugs lost, stolen or damaged during your covered trip. Up to $75 will be allowed if the services of a local physician are required to secure the replacement prescription. You must contact our emergency assistance provider.

3. **Emergency dental:** treatment ordered by a licensed dentist or dental surgeon as follows:

   a) up to $1,500 will be paid for treatment or repair of natural or permanently attached artificial teeth which are damaged by an injury to the head or mouth. Continuing dental treatment completed within 90 days after you return to Canada is available provided the treatment is related to the injury. Services performed by a family member are not covered;

   b) up to $300 to relieve acute pain and suffering not related to an injury. Services performed by a family member are not covered.

4. **Emergency paramedical services:** performed by a chiropractor, chiropodist, physiotherapist, osteopath or podiatrist for emergency treatment up to $300 per category of practitioner. Services performed by a family member are not covered.

5. **Psychotherapy:** Up to $1,000 for psychotherapy and psychologist care when provided on an out-patient basis.

6. **Psychiatric fees:** when provided on an in-patient basis following an emergency, fees billed separately for the services of a psychiatrist will be paid to a lifetime maximum of $10,000.

7. **Psychiatric hospitalization:** if you are admitted to hospital for suicide, attempted suicide, self-inflicted injuries, mental or emotional disorders (including but not limited to stress, anxiety, panic attacks, depression, eating disorders/weight problems), or psychiatric treatment, we will pay up to a lifetime aggregate limit of $50,000 for medical and/or psychiatric treatment received while you are in hospital resulting from one or more of these causes.

8. **Accommodation and meals:** commercial accommodation, meals, essential telephone calls, taxi fares or rental vehicle charges incurred by you, your travelling companion, or a family member travelling with you if one of you is relocated to receive emergency medical treatment or one of you is delayed beyond your return date due to sickness or injury.

   • This benefit is limited to $150 per day to a maximum of $450. Original receipts and the local attending physician’s written diagnosis of the sickness or injury must be submitted for this benefit to qualify for payment.

9. **Medical evacuation or return home:** in response to an emergency sickness or injury as follows:

   a) the extra cost of a one way fare on a commercial airline via the most direct route to return you to your place of residence in your home country; or

   b) the cost to accommodate a stretcher on a commercial airline via the most direct route to return you to your place of residence in your home country or to the most appropriate medical facility closest to your home in your home country, plus the reasonable cost of meals, accommodations and airfare expenses for a qualified medical attendant to accompany you if it is deemed medically necessary; or

   c) air ambulance transportation when it is medically necessary.

   • Benefits must be pre-approved and arranged by us in consultation with our medical advisors, the local treating physician and our emergency assistance provider for coverage to apply. If your unused return travel ticket is refundable, we will deduct the value of the refund from the return transportation cost we arranged or you may choose to turn your unused return ticket over to us.

10. **Bedside visit:** If you are admitted to hospital for an emergency sickness or injury and the local attending physician recommends that a relative or close friend should visit at your bedside, remain with you, or accompany you home, we will reimburse the cost of a round-trip fare by the most direct route and up to $500 for commercial accommodation and meals. We will automatically insure the accompanying family member or friend for emergency medical coverage under this policy until you are medically stable to return to your home country, subject to the eligibility, limitations, conditions, & exclusions of this policy.

   • These benefits are subject to prior approval by us.
11. **Return and escort of children:** This benefit is payable if you are confined to a hospital for more than 24 hours or you must return to your home because you have a medical emergency which is covered by this policy or in case of your death. We will pay for the transportation expenses incurred, up to the cost of a one way fare for the return home of any dependent children who are accompanying you. If your child is too young to travel alone, we will also pay the extra cost of a round trip air fare via the most direct route, overnight commercial accommodation, and reasonable meal expenses for an escort to accompany your child home. If the unused return travel ticket is refundable, we will deduct the value of the refund from the return transportation cost we arranged or you may choose to turn your unused return ticket over to us.

12. **Child care cost:** If you are admitted to hospital for an emergency sickness or injury during your covered trip and need to be relocated to receive emergency medical treatment or are delayed beyond your scheduled return date, we will reimburse you up to $50 per day to a maximum of $500 for the professional child care cost incurred during your covered trip to care for children travelling with you.
   - Original receipts from the professional child care provider are required.

13. **Return of travelling companion:** If you must return to your home country because of a medical emergency covered by this policy, we will reimburse you for the extra cost of a one way fare on a commercial flight via the most direct route to return your travelling companion back to your home country. If the unused return travel ticket is refundable, we will deduct the value of the refund from the return transportation cost we arranged.

14. **Repatriation of remains:** If you die during your covered trip, we will reimburse the reasonable expenses incurred up to the maximum amount specified in the Schedule of Maximum Benefits for:
   - a) preparing and transporting your remains or ashes back to your home country; or
   - b) the cremation or burial of your remains at the location where death occurs.

No benefit is payable for the cost of a headstone, casket and/or funeral service expenses. Benefits under this section shall not duplicate any benefits available under any other section of this policy.

15. **Identification of remains:** If someone is legally required to identify your remains before your body is released, we will reimburse the cost of one person to travel to the place where your remains are located via a round-trip fare by the most direct route and up to $500 for commercial accommodation and meals. We will automatically insure this person for Emergency Medical coverage under this policy for not more than 3 days until they return to your home country, subject to the eligibility, limitations, conditions, and exclusions of this policy.
   - This benefit must be pre-arranged and approved by us.

16. **Vehicle return:** We will pay the expenses associated with returning your vehicle to your home or your rental vehicle to the appropriate rental agency if you are unable to do so because of a medical emergency, up to $2,000. Return of commercial vehicles is not covered.

17. **Return of baggage and personal effects:** In the event of your medical evacuation or repatriation of remains arranged by the company, if there is insufficient space to accommodate your baggage and personal effects aboard the transport provided, we will reimburse you up to $200 to cover the cost of shipping these items to your home country.

18. **Incidental expenses:** If you are required to stay in a hospital for treatment of an emergency sickness or injury as an in-patient while on your covered trip, we will reimburse you up to $250 for your out of pocket expenses such as television rental, wi-fi and parking charges. Original receipts (no copies) must be submitted.

19. **Return to Destination:** If, following your emergency medical evacuation arranged by the company to your home country, you wish to return to your destination, we will reimburse you for the cost of a one way fare to the city from where the medical evacuation occurred.
   - This benefit is available only if:
     - a) Your attending physician at your place of residence determines that you require no further treatment;
     - b) You receive prior approval by us;
     - c) You choose this benefit instead of benefit #13, Vehicle Return; and
     - d) Your return must be prior to your original scheduled return date.

   - Once you return to your destination, a recurrence of the medical condition which necessitated your emergency medical evacuation or related medical condition will not be covered under this policy.

   - This benefit can only be used once during your covered trip. Upon return to your destination, the effective date of coverage is the day you leave your home country to return to your destination.

**What We Exclude**

The exclusions that apply to this coverage are listed in the Policy Exclusions section beginning on page 13.

**What We Pay**

You will be reimbursed for the reasonable and customary charges in excess of any other insurance coverage you have for the eligible emergency medical expenses listed above up to the maximum benefit amount described on the Schedule of Maximum Benefits.

If you have other insurance that may provide the same benefits you must notify us of that insurance, cooperate with our efforts to co-ordinate benefits payable by another insurer, and reimburse us for any payment that we have made that you receive from another insurer.

**BAGGAGE & PERSONAL EFFECTS**

**When It Applies**

If your baggage and/or personal effects are lost, stolen, damaged or delayed during your covered trip. Coverage is available up to the maximum amount of $800 in the aggregate.

**What We Cover & What We Pay – Baggage & Personal Effects – Lost, Stolen or Damaged**

When baggage and/or personal effects are lost, stolen, or damaged during your covered trip, we will reimburse you up to the maximum benefit amount as shown on the Schedule of Maximum Benefits for the plan you purchased.

We will pay the lesser of:
- 1. The replacement or repair cost, after an allowance is made for wear and tear or depreciation; or
- 2. The original purchase price.
ACCIDENTAL DEATH AND DISMEMBERMENT

When It Applies
If you sustain an injury while you are travelling on your covered trip.

What We Cover
You are covered for a sudden bodily injury caused by a happening due to external, violent, sudden or unexpected events beyond your control which occurs during your covered trip.

EXPOSURE AND DISAPPEARANCE
Loss from exposure to the elements by reason of a covered accident will be covered if such loss is otherwise payable under this policy.

What We Pay
You are covered up to the maximum amount shown on the Schedule of Maximum Benefits or as otherwise specified in the benefit when a covered loss occurs.

<table>
<thead>
<tr>
<th>Loss of</th>
<th>Maximum Benefit Payable</th>
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<tbody>
<tr>
<td>Life</td>
<td>$25,000</td>
</tr>
<tr>
<td>Both Hands or Both Feet</td>
<td>$25,000</td>
</tr>
<tr>
<td>Entire Sight of Both Eyes</td>
<td>$25,000</td>
</tr>
<tr>
<td>One Hand &amp; One Foot</td>
<td>$25,000</td>
</tr>
<tr>
<td>One Hand &amp; Entire Sight of One Eye</td>
<td>$25,000</td>
</tr>
<tr>
<td>One Foot &amp; Entire Sight of One Eye</td>
<td>$25,000</td>
</tr>
<tr>
<td>Complete &amp; Irrecoverable Loss of Speech or Hearing</td>
<td>$25,000</td>
</tr>
<tr>
<td>One Hand or One Foot</td>
<td>$12,500</td>
</tr>
<tr>
<td>Entire Sight of One Eye</td>
<td>$12,500</td>
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For a benefit to be payable under this coverage, the accident must happen on your covered trip and the resulting injury or death must occur within 365 days of the accident.

In the event your death is a result of an injury caused while riding:

1. Hand or foot: means that the hand or foot is completely and permanently severed at or above the wrist or ankle joint;
2. Sight: means the total and irrecoverable loss of entire sight.

If more than one loss results from any one accident, we will only pay the one largest benefit as listed above. No benefit is payable for a loss which is not shown above.
Regardless of how many valid policies you have purchased with our company, the maximum amount for which you can be covered under all policies issued for Travel Accident/Airflight Accident/Accidental Death and Dismemberment by our company as a result of any one incident is limited to an aggregate amount of $50,000. Any amount purchased in excess of $50,000 shall be refunded upon request.

The company’s maximum liability under this policy and all other Travel Accident/Airflight Accident/Accidental Death and Dismemberment Insurance policies issued by the company with respect to any one incident is limited to $12,000,000 in the aggregate, which will be shared proportionately among all claimants entitled to claim. In addition, the company’s maximum liability under this policy and all other Travel Accident/Airflight Accident Insurance/Accidental Death and Dismemberment policies issued by the company under this benefit with respect to more than one incident occurring during a calendar year is limited to $24,000,000 in the aggregate.

POLICY EXCLUSIONS

Exclusions only applicable to the Emergency Medical section of this Policy

There is no coverage and no benefits will be payable for claims resulting from or attributable to:

1. Expenses incurred for medical care or services where your covered trip was undertaken contrary to medical advice or after receiving a prognosis of a terminal sickness.
2. Any treatment:
   a) not required for the immediate relief of acute pain and suffering;
   b) which can reasonably be delayed until you return to your home country;
   c) for follow-up treatment, recurrence of a medical condition or subsequent emergency treatment or hospital stay for a medical condition or related medical conditions for which you had received emergency treatment during your covered trip.
   d) routine, general physical examinations, drugs or medication available without a prescription, eyeglasses or contact lenses or services which are not medically necessary.
3. Transplants of any kind.
4. Unless prior approval is obtained from us, any emergency air transportation, MRI, CAT Scan, surgery, cardiac procedures, including but not limited to cardiac catheterization, angioplasty or surgery.
5. Expenses incurred for all medical care or services including those related to an accident when this policy was purchased specifically to obtain hospital or medical treatment outside your home country, whether or not recommended by a physician.
6. Any expenses related to sexually transmitted diseases unless the medical services are being provided as a result of a sexual assault.
7. Expenses incurred for ongoing or recurring medical conditions. Once emergency treatment and care is completed, no further benefits for the same or related medical conditions will be covered.
8. All medical and emergency evacuation costs associated with childbirth that occurs after 26 weeks gestation or voluntarily induced abortion.
9. All neo natal, medical care and evacuation costs related to a baby born during the covered trip.
10. Any expenses related to coronavirus, SARS, or any mutation or variation of coronavirus or SARS. This exclusion is waived if you are vaccinated or if you are not medically eligible to be vaccinated.

Exclusions only applicable to the Baggage & Personal Effects section of this Policy

There is no coverage and no benefits will be payable for claims resulting from or attributable to:

1. Any animals;
2. Automobile and automobile equipment; aircraft; bicycles, except when checked as baggage with a common carrier; boats or other vehicles or conveyances; trailers; motors;
3. The following personal items:
   a) sunglasses (prescription or non-prescription), contact lenses;
   b) artificial teeth, dental bridges, dental retainers, hearing aids, prosthetic limbs, prescribed medications;
   c) keys, money, credit cards, tickets and documents (except as coverage is otherwise specifically provided herein), stamps, securities;
   d) sporting equipment if the loss results from the use thereof;
   e) travel tickets for your covered trip, except for administrative fees required to reissue such tickets;
4. Household effects and furnishings, antiques and collector's items;
5. Perishable or consumable items, including any tobacco products;
6. Property used in trade, business or for the production of income;
7. Computer software, including any expenses incurred for the restoration of any lost or corrupted data;
8. Property shipped as freight or property shipped prior to your departure date;
9. Property stolen from an unattended vehicle that was not locked in the trunk or property left in view where a secure trunk is not available;
10. Property caused by defective materials or craftsmanship, normal wear and tear, gradual deterioration, inherent vice or mechanical breakdown;
11. Property caused by electrical current, including electric arcing, that damages or destroys electrical devices or appliances;
12. Property caused by the confiscation, detention, requisition or destruction of your baggage and personal effects by customs or other authorities;
13. Articles purchased during your covered trip without original receipts attached to the claim;
14. Jewellery, precious stones, watches; cameras, including related equipment; articles consisting in whole or in part of silver, gold or platinum; furs and fur-trimmed items; cell phones, computers and other digital or electronic items that are placed in the possession of a common carrier;
15. Property caused by breaking or scratching of fragile articles other than cameras or binoculars, unless caused by fire or accident to the vehicle in which they are being carried;
16. Property insured under any homeowner's or tenant's package policy;
17. Any baggage or property left unattended;
18. Shortages due to error, omission or depreciation in value;
19. Mysterious disappearance.

Exclusions only applicable to the Accidental Death and Dismemberment section of this Policy

There is no coverage and no benefits will be payable for claims resulting from or attributable to:

1. Disease or any physical defect, infirmity or sickness which existed prior to the commencement of your covered trip;
2. Your suicide; or
3. Any act of terrorism.
Exclusions applicable to all sections of this Policy

There is no coverage and no benefit will be payable for any claim arising from or attributable to:

1. Your or your travelling companion’s pre-existing condition that was not stable during the time periods indicated in the Stability Table:

<table>
<thead>
<tr>
<th>Age</th>
<th>Stability Period</th>
<th>Counting Back From Departure Date</th>
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<tbody>
<tr>
<td>0-59</td>
<td>60 days</td>
<td></td>
</tr>
<tr>
<td>60 and over</td>
<td>90 days</td>
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2. Any sickness or injury resulting from:
   a. a heart condition involving the taking of nitroglycerine more than once per week for the relief of angina within the time periods listed in the Stability Table
   b. a lung condition treated with home oxygen or the taking of oral steroids (presnisone or prednisolone) within the time periods listed in the Stability Table

3. Any event that might cause your covered trip to be cancelled or abandoned, which you or your travelling companion had knowledge of at the time of purchasing this insurance;

4. Consequential loss of any kind including loss of enjoyment of your covered trip from any cause;

5. Except as provided under Emergency Medical (#5 Psychotherapy, #6 Psychiatric Fees, and #7 Psychiatric Hospitalization page 8), your mental or emotional disorders including, but not limited to stress, anxiety and depression; major psychiatric illness such as psychosis, schizophrenia and major affective mood disorders;

6. Any elective medical treatment;

7. Your use of drugs, alcohol, or any medication that results directly or indirectly in the condition causing a claim;

8. Any sickness or injury resulting from long term excessive consumption of alcohol or drugs;

9. Except as provided under Emergency Medical (#5 Psychotherapy, #6 Psychiatric Fees and #7 Psychiatric Hospitalization) your attempted suicide or any intentionally self-inflicted injury;

10. Your participation in adventurous activities;

11. Your participation in organized professional sporting activities;

12. Driving a motorcycle, moped, or scooter, whether or not you are driving on publicly maintained roads, driving off-road or on private property (unless you hold an applicable valid driver’s license);

13. Your riding, driving or participating in motorized races of speed or endurance;

14. Piloting an aircraft or air travel on any air supported device other than as a fare-paying passenger on a flight operated by a common carrier;

15. Fraud, concealment or deliberate misstatement in relation to any matter affecting this insurance or in connection with the making of any claim hereunder;

16. Your participation in a crime or malicious act;

17. Participation in a riot or insurrection;

18. War or act of war (whether declared or undeclared), invasion, act of foreign enemy, hostilities, civil war, rebellion, revolution, insurrection or military uprising or usurped power;

19. Act of terrorism by nuclear means and terrorism by dissemination of biological, chemical and or bio-chemical agents and substances;

20. Participation in the armed forces;

21. Events related to “Avoid Non-Essential Travel” and “Avoid All Travel” advisories issued by the Government of Canada prior to your effective date that were or continue to be in effect for any country, region or city of destination on your covered trip, as reflected in your travel itinerary;

22. Orbital and suborbital flights;

23. A condition that is directly or indirectly related to any medical condition for which you have declined or delayed recommended treatment, diagnostic testing or prescription medication in the 2 years prior to the date it gives rise to a claim under the policy;

24. Contamination resulting from radioactive material or nuclear fuel or waste; or

25. Any trip as a driver, operator, co-driver, crewmember, or passenger on any commercial vehicle used to carry goods for sale, resale or income.

GENERAL POLICY PROVISIONS

Assignment of benefits: Where the company has paid expenses or benefits to you or on your behalf under this policy, the company has the right to recover, at its own expense, those payments from any applicable source or any insurance policy or plan that provides the same benefits or recoveries. This policy also allows the company to receive, endorse and negotiate eligible payments from those parties on your behalf. When the company receives payment from any government or private health insurance plan, any other insurer, or any other source of recovery to the company, the respective payor is released from any further liability with respect to the claim.

Autopsy: In the event of your death, the company may request an examination or autopsy subject to any applicable laws relating to autopsies.

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

Conformity with existing laws: Any provision of this policy which is in conflict with any federal, provincial or territorial law where this policy is issued is hereby amended to conform to the minimum requirements of that law. In all other respects, the terms and provisions of this policy shall apply.

Despite any other provision contained in the contract, the contract is subject to the statutory conditions in the Insurance Act respecting contracts of accident and sickness insurance.

Contract changes: This policy is a legal contract between you and us. It, including any endorsements and attached papers are the entire contract. No change in this policy is valid unless approved in writing by one of our officers. No agent has the right to change this policy or to waive any of its provisions.

Coordination of benefits: The company will coordinate benefits payable under this policy with benefits available to you under any other policy or plan, so that payments made under this policy and from all other sources will not exceed 100% of the eligible expenses incurred.

Currency: All premiums and benefits under this policy are payable in Canadian currency based on a) the rate of exchange set by any chartered bank in Canada on the last date of service, or b) on the date the payment is issued to the provider of service.

Limitation of liability: The company’s liability under this policy is limited solely to the payment of eligible benefits up to the maximum amount
purchased for any loss or expense. The **company** upon making payment under this **policy** does not assume any responsibility for the availability, quality, results or outcome of any **treatment** or service, or your failure to obtain any **treatment** or service covered under the terms of this **policy**.

**Medical examination:** The **company** reserves the right to have you medically examined in the event of a claim.

**Medical records:** In the event of a claim, you agree to provide access to and we reserve the right to review any and all medical records or documentation relating to your claim(s) from any licensed **physician**, **dentist**, medical practitioner, **hospital**, clinic, insurer, individual, institution or other provider of service relating to the validity of your claim.

**Refund of premium:** Other than the “10 Day Right to Examine” on page 2, premium refunds are not available. This Policy is non-transferable.

**Right of recovery:** In the event that you are found to be ineligible for coverage, any benefit is paid in error, payment is made in excess of the amount allowed under the provisions of this **policy**, a claim is found to be invalid, or benefits are reduced in accordance with any **policy** provision, the **company** has the right to collect from you any amount which it has paid on your behalf to medical providers or other parties or seek reimbursement from you, your estate, any institution, insurer or person to whom the payment was made.

**Secondary coverage:** The benefits in this **policy** are secondary to those available under any other coverage you may have including but not limited to government health insurance, group or personal accident and sickness insurance, extended health or medical care coverage, any automobile insurance or benefits plan, homeowner, tenant or other multi-peril insurance, credit card benefit insurance, other travel insurance and replacement travel options offered by airlines, tour operators, cruise lines and other travel suppliers.

**Subrogation:** If you suffer a loss caused by a third party, the **company** has the right to subrogate your rights of recovery against the third party for any benefits payable to or on your behalf, and will, at its own expense and in your name, execute the necessary documents and take action against the third party to recover such payments. You must not take any action or execute any documents after the loss that will prejudice the **company**’s rights to such recovery.

**Sworn statements:** We have the right to request that claims documents be sworn under oath and have you examined under oath in respect to any claim documents submitted.

**DEFINITIONS**

**Accident** means a happening due to external, violent, sudden or fortuitous causes beyond your control which occurs during your period of coverage.

**Act of terrorism or terrorism** means the unsanctioned and illegal use of violence (excluding general civil disturbance, rioting and act of war (declared or undeclared) or the intentional release of a biological material), which caused destruction of property, **injury** or death for the express or implied purpose of achieving a political, ethnic or religious goal or result.

**Adventure activities** means participating in any of the following: all-terrain vehicles (ATV) bungee jumping, dirt biking (off-road), hang-gliding, heliskiing, hot air ballooning, mountain climbing, parachuting, paragliding, rock climbing (not mountaineering) scuba diving (unless qualified and not diving deeper than 130 feet) and skydiving.

**Application** means the printed form, computer printout, invoice or document that is used to apply for this insurance as provided by guard.me or the multi-stepped process that must be completed by the applicant when purchasing this insurance electronically through guard.me. The **application** confirms the insurance coverage you have purchased sets forth the **departure date**, the **departure point** and the **return date** of your **covered trip** and forms an integral part of the **policy** contract.

**Baggage and/or personal effects** means items or articles of necessity, adornment or for personal convenience including clothing and other personal effects worn on the person that are usually carried by travellers for their individual use while travelling.

**Bankruptcy** or **default** means the inability to provide contracted services due to total cessation or complete suspension of operations due to financial insolvency, with or without the filing of a Bankruptcy petition, whether voluntary or involuntary, by a tour operator, cruise line, airline or other travel supplier.

**Children** (for the purpose of the “Return & Escort of Children” benefit) means any insured unmarried person who is dependent upon you for support, is travelling with you or who joins you during your **covered trip**.

**Common carrier** means commercial airline carrier, cruise ship, ferry, bus, train, taxi, limousine or other similar vehicle that is licensed, intended and used primarily to transport passengers for hire not including rented, leased or privately owned vehicles.

**Company, we, our, us** means Old Republic Insurance Company of Canada.

**Contamination** means poisoning of people by nuclear, chemical and/or biological substances that cause **sickness** or death.

**Covered trip** means travel arrangements insured by this **policy** commencing on the **effective date** and ending on the **return date**, both as shown on the insurance confirmation.

**Dentist** means a qualified doctor of dentistry lawfully licensed to practice dentistry in the place where dental services are performed, but does not include you, a **travelling companion** or a **family member**.

**Departure date** means the later of the date shown as such on the application or the date you actually depart on your **covered trip**.

**Departure point** means the city/province/territory or country you depart from on your **covered trip**.

**Effective date** means the date your insurance coverage under this **policy** or a specific benefit of this **policy** begins. (See page 4)

**Emergency** means a sudden and unforeseen **medical condition** that requires immediate **treatment**. An **emergency** no longer exists when medical evidence indicates that no further **treatment** is required at your destination or you are able to return to your **home country**, or continue with your **covered trip**.

**Emergency assistance provider** provides the emergency service 24 hours a day, 7 days a week, during your **period of coverage**. See page 6.

**Family member** means **spouse**, parent, legal guardian, step-parent, grandparent, grandchild, in-laws, natural or adopted child, stepchild, brother, sister, stepbrother, stepsister, foster child, aunt, uncle, niece, or nephew.

**Fare** means the lowest single seat fare from any International Air Transportation Association carrier.

**Home country** means the country where you permanently resides.

**Hospital** means an institution that is licensed, staffed and operated for the care and **treatment** of in-patients and out-patients. **Treatment** must be supervised by **physicians** and there must be registered nurses on duty 24 hours a day. Diagnostic and surgical capabilities must also exist on the premises or in facilities controlled by the establishment.

A **hospital** is not an establishment used mainly as a clinic, extended or palliative care facility, rehabilitation facility, addiction **treatment** centre, convalescent, rest or nursing home, home for the aged or health spa.
Host at destination means the person with whom you have arranged overnight accommodation for the majority of your covered trip at their usual place of residence, not including commercial facilities.

Host country means your destination country.

Injury means sudden bodily damage caused by an accident during your period of coverage causing you to seek medical treatment.

Material fact means any fact that would cause us to decline your application for insurance or charge more premium than you have paid for the insurance policy.

Medical condition means any disease, sickness or injury including symptoms of undiagnosed conditions.

Medically necessary means treatment or services that are appropriate for the relief of sickness or injury in an emergency, based on generally accepted professional medical standards.

Minor illness means an infection that ends 30 days prior to the effective date of coverage and does not require: use of medication for a period greater than 15 days; more than one follow-up visit to a physician; hospitalization; surgical intervention; or, consultation with a medical specialist. A chronic illness or the complication of a chronic illness is not a minor illness.

Mountain climbing means the ascent or descent of a mountain requiring the use of specialized equipment including crampons, pick-axes, anchors, bolts, carabiners and lead-rope or top-rope anchoring equipment.

Natural disaster means a disaster resulting from natural causes including flood, hurricane, tornado, earthquake, volcanic eruption or blizzard.

Physician means a person who is not you, or your family member or your travelling companion, who is legally licensed in the jurisdiction where the services are provided, to prescribe and administer medical treatment.

Plan administrator means Travel Healthcare Insurance Solutions Inc.

Policy means this document and your application for insurance hereunder, which is issued in consideration of payment of the required premium.

Pre-existing condition means any medical condition other than a minor illness that exists prior to your effective date.

Psychiatrist means a person who is not you, or your family member or your travelling companion, who is qualified and legally licensed to practice psychiatry in the place where psychiatric services are performed.

Reasonable and customary means charges incurred for goods and services that are comparable to what other providers charge for similar goods and services in the same geographic area.

Recurrence means the appearance of symptoms caused by or related to a medical condition which was previously diagnosed by a physician or for which treatment was previously received.

Return date means the date on which you are scheduled to return to your departure point/home country, as shown on your application.

Scheduled airline means any airline licensed for the transportation of passengers for hire, and which maintains regular published schedules (including any chartered flights by such airlines or licensed tour companies).

Sickness means an acute illness, acute pain and suffering or disease that requires emergency medical treatment or hospitalization due to the sudden onset of symptoms during your period of coverage.

Spouse means the person who is legally married to you, or if not married to you, has been living in a conjugal relationship with you for a continuous period of at least one year.

Stable means a medical condition where:
1. there has not been any new treatment prescribed or recommended, or change(s) to existing treatment (including a stoppage in treatment); and
2. there has not been any change to any existing prescribed drug (including an increase, decrease, or stoppage to prescribed dosage), or any recommendation or starting of a new prescription drug. If you require a routine adjustment to the dosage of your prescription for Coumadin, Warfarin or Insulin (unless it is newly prescribed) to ensure correct blood levels are maintained, such a change is not considered an alteration in medication provided the condition remains unchanged; and
3. the medical condition has not become worse; and
4. there has not been any new, more frequent or more severe symptoms; and
5. there have not been any tests, investigation or treatment recommended, but not yet complete, nor any outstanding test results; and
6. there is no planned or pending treatment.

All of the above conditions must be met for a medical condition to be considered stable.

Terminal sickness means a medical condition from which no recovery is expected and which carries a prognosis of death within 12 months of your effective date.

Travel supplier means any entity or organization that coordinates or supplies travel services for you.

Travelling companion means someone who shares travel arrangements with you on your covered trip up to a maximum of five persons, including you.

Treat, treated or treatment means a procedure prescribed, performed or recommended by a physician for a medical condition. This includes but is not limited to prescribed medication, investigative testing and surgery.

Vaccinated means having received the full course of an approved Health Canada vaccine for coronavirus (COVID-19). The vaccine must be taken according to the manufacturer’s recommendation, including any applicable post vaccination waiting period prior to your effective date.

You or your means a person who is eligible for coverage under this policy and who is named on the application for this insurance and for whom the required premium has been paid to and accepted by guard.me.

In this policy, words and terms denoting the singular shall be interpreted to mean the plural and vice versa, unless the context clearly indicates otherwise.
CLAIMS INFORMATION

If You Are Travelling
Contact the emergency assistance provider at the numbers listed on page 6 of this policy.

Contact Us
guard.me Claims
guard.me Global Travel Insurance
P.O. Box 557, Hamilton, Ontario L8N 3K9
Toll Free in Canada & USA
English: 1-877-640-9877
French 1-800-245-1662
Direct English 1-905-667-2540
Direct French 1-905-667-5020
Toll Free Fax: 1-866-551-1704
Fax: 905-528-8338
Email: traveladmin@orican.com

How To Submit A Claim
You can download a claim form directly from: www.guard.me or you can contact us at the numbers above.

To make a claim for benefits under this policy:
• Submit your claim as soon as is reasonably possible;
• Proof of the claim must be submitted no later than 12 months after the date of the event or loss.

Written Proof of a Claim shall include:
1. the completion of any claim forms furnished by the company/plan administrator;
2. original receipts;
3. a written report, complete with the diagnosis by the attending physician, if applicable; and
4. any other form of documentation required by the company to validate your claim (for example, a letter from the airline confirming the change in the scheduled flight or the cause of the delay).

Original supporting claims documentation must be provided, however, the company may accept certified copies if the original documentation cannot be provided for a reasonable cause. Failure to provide applicable support for a claim shall invalidate any claim under this policy. All documents required to support or validate the claim, including English or French translations of such documents, must be provided free of expense to the company.

Claim Payments

We will pay covered claims within 30 days of receiving all of the necessary information required to accurately assess your claim.

Benefit payments will be made to you or to any person or entity having a valid assignment to such benefits. In the event of your death, any balance remaining or benefits payable for loss of life will be paid to the beneficiary noted by the you. If a beneficiary is not designated by you, benefits will be paid to the first of the following surviving preference beneficiaries:
1. your spouse;
2. your child or children jointly;
3. your parents jointly if both are living, or the surviving parent if only one survives;
4. your brothers and sisters jointly; or
5. your estate.

Limitation of Action

If you have a claim in dispute under this policy, you must begin any legal action or proceeding against the company within 24 months following the date of the event which caused the claim. If, however, this limitation is invalid according to the laws of the province Ontario, Canada where this policy was issued, you must commence any legal action or proceeding within the shortest time limit permitted by those laws. All legal actions or proceedings must be brought in the province of Ontario, Canada where the head office of the company is located.

PRIVACY

The company is committed to protecting your privacy. Collecting personal information about you is essential to our ability to offer you high-quality insurance products and service. The information provided by you will only be used for determining your eligibility for coverage under the policy, assessing insurance risks, managing and adjudicating claims and negotiating or settling payments to third parties. This information may also be shared with third parties, such as guard.me, other insurance companies, health organizations and government health insurance plans to adjudicate and process any claim. In the event that we must share your information with a third party who conducts business outside of Canada, there is a possibility that this information could be obtained by the government of the country in which the third party conducts business. We take great care to keep your personal information accurate, confidential and secure.

Our privacy policy sets high standards for collecting, using, disclosing and storing personal information. If you have any questions about the company’s privacy policy, please contact our Privacy Officer at 1-800-530-5446 or by email at: privacy@oldrepubliccanada.com.

Underwritten by:
Old Republic Insurance Company of Canada

Jason Smith, CPA, CA
President and Chief Executive Officer
August 2021
GMG-B-TIE0821
The Insurer's maximum liability for any negotiated settlement or court ordered award is the lower of:

1. the negotiated settlement or court ordered award plus all associated legal costs and disbursements; or,
2. the Benefit Maximum.

**CONDITIONS AND LIMITATIONS**

1. No admission, offer, promise or indemnity shall be made without the Insurer's consent. The Insurer shall be entitled to take over and conduct the defense of any legal action brought against You and to settle such action in Your name.

2. You are obligated to take all possible steps to prevent and minimize the loss including notifying the Insurer or Plan Administrator as soon as possible and supplying all information in respect of the circumstances surrounding a potential claim.

3. You shall provide all the information and assistance that is required by the Insurer. You shall provide the Insurer with copies of all letters, pleadings and other relevant documents and materials received by You.

4. The Insurer may, at the Insurer's sole discretion, in respect of any occurrence(s) covered by this Rider, pay to You the Benefit Maximum applicable to such occurrence(s), less any amounts already paid, or any lesser amount for which the claim(s) arising from such occurrences(s) can be settled. The Insurer shall thereafter be under no further liability in respect of such occurrence(s) except that where the Benefit Maximum has not been paid, the Insurer will pay for legal costs and disbursements, which have been pre-approved by the Insurer up to the remaining limits of the Benefit Maximum.

5. Benefits payable are in excess of any homeowner, tenant, or other insurance, and all other sources of recovery. If any other insurance is available to You, Your Host Family, or any third party for a covered loss under this Rider, the Insurer's obligations under this Rider are excepted from such insurance. In no event shall this insurance apply until all other insurance has paid its applicable limit of insurance.

6. To qualify for coverage under this Rider, You must notify the Plan Administrator at the time You are first advised of a legal action/claim against You. You can contact the Plan Administrator at:
   Travel Healthcare Solutions Inc. d.b.a. Guard.me Claims
   300 John Street, Suite 405
   Thornhill, Ontario Canada L3T 5W4

7. Governing law: This Rider is governed by the laws of the province of Ontario and is subject to the provisions of the Insurance Act respecting contracts of insurance entered into in Ontario.
EXCLUSIONS

A. There is no coverage for any claims/actions presented that result or arise from:
1. war, invasion, act of a foreign enemy, hostilities, civil war, rebellion, revolution, insurrection or military power;
2. any claim that arises directly or indirectly, in whole or in part, out of Terrorism or by any activity or decision of a government agency or other entity to prevent, respond to or terminate Terrorism regardless of any other cause or event that contributes concurrently or in any sequence to the loss or damage;
3. Your participation in riot or insurrection;
4. the use of any weapons;
5. bodily injury or property damage which is required to be insured under a nuclear energy liability policy issued by the Nuclear Insurance Association of Canada, or any other group or pool of insurers;
6. a) sexual, physical, psychological or emotional abuse, molestation or harassment, including corporal punishment by, or at Your direction, or with Your knowledge; or
b) Your failure to take steps to prevent sexual, physical, psychological or emotional abuse, molestation or harassment or corporal punishment;
7. Your transmission of an illness/disease;
8. damage caused by Your commission of or attempt to commit a willful, illegal or malicious act;
9. business pursuits;
10. the rendering or failure to render any professional service;
11. property that You sell, rent, lease or lend for use by third parties;
12. damage that is due to wear or tear;
13. damage caused by animals owned by or being cared for by you;
14. a) the erasure, destruction, corruption, misappropriation, misinterpretation of data;
   b) erroneously creating, amending, entering, deleting or using data, including any loss of use arising from any of these actions or events; or
   c) the distribution or display of data by means of an internet website, the internet, an intranet, extranet, or similar device or system designed or intended for electronic communication of data;
15. the ownership, use (including loading/unloading) or operation of any automobile, watercraft, aircraft, motorized vehicle or trailer attached to any of the foregoing;
16. the occupation or ownership of any land or building except any building You temporarily occupy during the Policy Period of Coverage;
17. the use of drugs, alcohol or any medication which results directly or indirectly in the condition causing a claim.
18. expenses which are recoverable or which could have been recovered from any other source including but not limited to any individual, group or prepaid employee or private health insurance plan, credit card coverage or government health insurance plan or third party liability plan/policy;
19. fraud, concealment, or deliberate misstatement in relation to any matter affecting this insurance or in connection with the making of any claim hereunder; and
20. Your travel to or within a country, city or region listed in any level of a travel warning that has been issued by Your Home Country or Your Host Country to warn its residents against travel.

B. Nor will any coverage be provided in relation to claims and/or actions brought:
1. by Your Immediate Family;
2. by any person who is employed by You;
3. for any punitive or exemplary damages;

CLAIMS

To make a claim contact:

Unica Insurance Inc.
7150 Derrycrest Drive
Mississauga, Ontario, L5W 0E5
Tel: 1-866-864-1113

Definitions Applicable Only to This Rider:

Bodily Injury means bodily injury, sickness or disease or resulting death.

Host Country means the country in which You are temporarily residing as a student while away from Your Home Country.

Host Family means the individual(s) or family with whom You are residing as a student while away from Your Home Country.

Immediate Family means Your Spouse, parent, legal guardian, step-parent, grandparent, grandchild, in-laws, natural or adopted child, stepchild, brother, sister, stepbrother, stepsister, aunt, uncle, niece, nephew or an employed Caregiver for unmarried dependent children under 19 years of age.

Insurer means Unica Insurance Inc.

Legal Liability means responsibility which courts recognize and enforce between persons who sue one another.

Plan Administrator means Travel Healthcare Insurance Solutions Inc. doing business as guard.me.

Property Damage means:
1. physical damage to, or destruction of, tangible property;
2. loss of use of tangible property.

Spouse means Your legally married spouse, or a person with whom You have been residing and who is publicly represented as Your spouse.

All other definitions conditions, limitations, exclusions and provisions of the guard.me Global Travel Insurance Policy to which this Rider is appended are applicable.

Travel Healthcare Insurance Solutions
300 John Street, Suite 405,
Thornhill, Ontario CANADA L3T 5W4
Tel: (905) 731-8140 Toll-free: 1-877-873-8447
Fax: (905) 731-6676 Toll-free: 1-866-329-8447
Email: admin@guard.me
Website: www.guard.me

ISO9001:2008 Registered

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