

ROUNDTRIP

Travel Benefits

Evidence of Benefits

Administered by:
Seven Corners, Inc.
Carmel, IN USA

IMPORTANT

Refer to Your ID Card for Your Protection Plan benefits and limits.

Note: certain capitalized words are defined terms in this Evidence of Benefits.

ROUNDTRIP Protection Plan

The following schedule shows the Maximum Benefit Amounts available through this program. Please review Your Protection Plan schedule to determine which benefits and limits apply to Your Trip.

Benefit	Per Person Limit
Trip Cancellation	Tour Cost to a maximum of: \$20,000
Trip Interruption	150% or tour cost maximum
Trip Delay / Missed Connection	\$500
Medical Expense	\$50,000
Medical Evacuation / Repatriation	\$250,000
Lost Baggage / Personal Effects	\$1,000
Baggage Delay	\$200
24-Hour AD&D	\$10,000
Travel Assistance Services	Included
Optional Flight Accident Per Trip	\$100,000; \$250,000; or \$500,000
Optional Collision Damage Waiver (CDW)	\$35, 000

Benefit amounts must be purchased for the full cost of the trip (\$20,000 limit per person).

TRIP CANCELLATION/TRIP INTERRUPTION

Trip Cancellation / Interruption

Trip Cancellation:

You have benefits in the amount purchased for unused non-refundable prepaid expenses for travel arrangements, whenever you are prevented from taking a trip for any of the following reasons that occur after the effective date* of your protection plan:

1. Specified sickness, injury or death of you, your traveling companion, business partner or family member of either you or your traveling companion that results in medically imposed restrictions as certified by a legally qualified physician at the time of loss, preventing your continued participation in the trip.

2. If You purchase RoundTrip within ten (10) days of Your initial Trip payment* and for the full non-refundable cost of Your Trip, You will be eligible for benefits up to a maximum limit of \$20,000 or the benefit amount protected, whichever is less, due to the Bankruptcy or Default of an airline, cruise line, or tour operator (other than the travel agent or Travel supplier that solicited this Protection Plan and from whom You purchased Your Travel Arrangements) which stops service more than fourteen (14) days following Your Protection Plan Effective Date. Your scheduled Departure Date must be no more than fifteen (15) months beyond the Effective Date of Your Protection Plan. Benefits will be paid due to Bankruptcy or Default of an airline only if no alternate transportation is available. Coverage does not apply if the petition for Bankruptcy was filed prior to the Effective Date of Your Protection Plan. If alternate transportation is available, benefits will be limited to the change fee charged to allow You to transfer to another airline in order to get to Your intended destination. The Bankruptcy or Default benefit is excess and secondary to all other forms of indemnity. *For the Post-Departure Plan You must protect the full length of Your Trip.
3. Strike that causes complete cessation of services of your common carrier for at least 48 consecutive hours.
4. Weather that causes complete cessation of services of your common carrier for at least 48 consecutive hours.
5. Employer termination or layoff affecting you or a person sharing the same room. Employment must have been with the same employer for at least three continuous years.
6. Terrorism. The Terrorist Incident must occur in a city listed on Your itinerary within 30 days prior to Your Scheduled Departure Date. This same city must not have experienced a Terrorist Incident within the 90 days prior to the Terrorist Incident, which is causing Your cancellation. Benefits are not provided if Your Travel Supplier offers a substitute itinerary.
7. Hijack, quarantine, jury duty or court ordered appearance as a witness in a legal action in which you or your traveling companion are not a party (except law enforcement officers).
8. Primary residence of you or your traveling companion is rendered uninhabitable due to unforeseen circumstances.
9. Burglary of you or your traveling companion's primary residence within 10 days of departure or during your trip.
10. Felonious assault of you or your traveling companion within 10 days of departure or during your trip.
11. You or your traveling companion are called to emergency military duty for a national disaster other than war.
12. Traffic accident directly involving either you or your traveling companion, substantiated by a police report, while en route to a scheduled departure point.
13. If your travel supplier cancels your trip, you will receive up to \$75 for the reissue fee charged by the airline for your tickets. You must cover the full cost of the trip.

** Effective Date is the date which begins at 12:01 a.m. following the: 1) postmark date of your enrollment form or 2) the date you fax or transmit your enrollment via the internet with the proper payment.*

All cancellations must be reported to the Travel Supplier within 72 hours of the event causing the need to cancel. If the event delays the reporting of the cancellation beyond the 72 hours, report the event as soon as possible. All other delays of reporting beyond 72 hours will result in reduced benefit payments.

Trip Interruption: If You are prevented from completing a Trip for any of the reasons listed under the Trip Cancellation section above that occur after Your Protection Plan Effective Date and after the departure date of the Trip, You are eligible up to the benefit amount purchased for:

- Any unused non-refundable prepaid expenses for Travel Arrangements;
- Return air: One way Economy Transportation to return to Your original destination or rejoin Your Trip less the value of the original unused return travel ticket;
- Accommodations and transportation expenses for up to \$150/day for 10 additional days when a Traveling Companion must remain hospitalized or an Injury or Sickness not requiring hospitalization prevents You from continuing travel and You must extend Your Trip with additional hotel nights due to medically imposed restrictions on a Traveling Companion as certified by a Legally Qualified Physician.
- Single supplement upgrade - You are eligible for benefits when Your Traveling Companion cancels or interrupts a trip for a specified reason and You do not.

TRIP DELAY / MISSED CONNECTION

You are eligible for benefits up to the benefit amount shown on Your certificate for: a) Additional Transportation Cost to join the Trip or return home, including up to \$150 per day for reasonable accommodations and meals, if Your delay requires an unplanned overnight stay; or b) unused nonrefundable portion of the prepaid expenses as long as the expenses are supported by proof of purchase and are not reimbursable by any other source. Delay must be for 3 hours or more and certified due to one of the following reasons: 1) Delay of Common Carrier (which is certified by the Common Carrier); 2) A traffic accident in which You were not directly involved (substantiated by a police report); 3) Documented weather condition preventing You from getting to the point of departure; 4) Quarantine, hijacking, strike; 5) Lost or stolen passports, travel documents or money (must be substantiated by a report to the policy or the appropriate authority); 6) Natural disaster, terrorism or riot

MEDICAL EXPENSE

You are eligible for benefits up to the benefit amount shown on Your certificate for: 1) Eligible Expenses incurred as a result of an accidental Injury which occurs or Sickness which first manifests itself during the Trip. You must receive initial Medical Treatment for Injury or Sickness within 30 days after the date of the accident that caused the Injury or the onset of Sickness. All treatment must be received within 52 weeks following the date of the accident or after onset of Sickness. 2) Benefits will include expenses for emergency dental treatment not to exceed \$750. 3) Advance payment will be made to a Hospital, subject to the applicable benefit amount, if needed to secure Your admission to a Hospital because of Sickness or Injury which first occurs during the course of the Trip. The authorized Assistance Company will coordinate advance payment to the Hospital. In all cases, benefits will not be paid in excess of the Usual and Customary Charges.

MEDICAL EVACUATION / REPATRIATION

You are eligible for benefits equal to the benefit amount purchased for: 1) Medical evacuation which is determined by a Legally Qualified Physician and the authorized Assistance Company's medical director when Injury or Sickness is acute or life threatening and adequate treatment is not available at a local Hospital. Transportation will be provided to the closest Hospital or medical facility capable of providing adequate treatment; 2) Medical repatriation is provided when it is deemed Medically Necessary by a Legally Qualified Physician and the authorized Assistance Company for You to return to Your home or a Hospital near Your home for continued treatment. Transportation Expense incurred will be paid for You via one-way Economy Transportation; or commercial upgrade, based on Your condition as recommended by the local attending Legally Qualified Physician and the authorized Assistance Company: a) to return to Your permanent residence or b) to be moved to a Hospital or medical facility closest to Your permanent place of residence capable of providing that treatment; 3) Either: a) transportation will be provided for the return trip home via Economy Transportation for any dependent children under 18 who are accompanying You if You are confined to a Hospital for more than 7 consecutive days; or b) if You are traveling alone and are confined to a Hospital for more than 7 consecutive days, this benefit will provide one round-trip Economy Transportation for a person of Your choice to visit You in a Hospital. 4) Benefits will also be paid to return your mortal remains to your home country should you die while on your trip (as described in the Travel Assistance Services Section).

These benefits provide the most appropriate and Economical Transportation by the most direct and economical route. This benefit for land or air transportation includes, but is not limited to, commercial stretcher, medical escort, or the Usual and Customary Charges for air ambulance, provided such transportation has been pre-approved and arranged by the authorized Assistance Company.

Benefits are calculated less the value of an unused return travel ticket. If benefits are payable under Your Protection Plan and You have other insurance that may provide benefits for this same loss, we reserve the right to recover from such other insurance.

Note, Pre-existing Condition limitation is automatically waived for Medical Evacuation / Repatriation.

BAGGAGE & PERSONAL EFFECTS

You are eligible for benefits up to the benefit amount for lost, stolen, or damaged baggage or personal items subject to a maximum reimbursement of up to \$300 per article. A maximum of \$1000 applies to the total amount payable for loss of any or all of the following: jewelry, watches, articles consisting in whole or in part of silver, gold or platinum, articles trimmed with fur, cameras and their accessories and related equipment. In addition, the following reimbursements are included in this benefit: 1) Lost or stolen passport or visa (\$50 maximum); 2) Lost or stolen credit cards (cost associated with the unauthorized use - \$50 maximum subject to verification that You have complied with all conditions of the credit card company).

The least of the following amounts will be paid for lost, stolen, or damaged baggage or personal items under this benefit: 1) The actual cash value (cost less proper deduction for depreciation) at the time of loss, theft or damage; 2) The cost to repair or replace the article with material of a like kind and quality; or 3) \$300 per article. This benefit does not apply to losses on property specifically scheduled under other insurance.

BAGGAGE DELAY

If Your checked baggage is delayed or misdirected while on Your Trip for more than 24 hours from Your time of arrival at Your destination other than Your residence by a Common Carrier, You are covered for the expense of necessary purchases of personal items up to the Maximum Benefit Amount as long as the expense is substantiated by receipts for purchases. Common Carrier must certify the delay.

ACCIDENTAL DEATH & DISMEMBERMENT

You are eligible for benefits 24 hours a day, in an amount equal to the benefit amount shown on your schedule/certificate, when You sustain Injuries resulting in any of the following losses within 180 days from the date of the accident. Where applicable You will receive benefits in an amount equal to the amount purchased when You sustain Injuries on a Common Carrier: 1) Received while a passenger (not as a pilot, operator or member of the crew) riding in, boarding or alighting from a public conveyance provided by a Common Carrier; and 2) Resulting in any of the losses listed below within 180 days from the date of the accident. Benefits will be paid for the following types of Loss or Injury in the amounts shown:

Type of Loss	Percentage of Benefit Amount
Loss of Life	100%
Loss of both feet	100%
Loss of both hands	100%
Loss of both eyes	100%
Loss of one hand and one foot	100%
Loss of one hand and one eye	100%
Loss of one foot and one eye	100%
Loss of one hand	50%
Loss of one foot	50%
Loss of one eye	50%

Loss of hand or hands, or foot or feet, means severance at or above the wrist joint or ankle joint, respectively. Loss of eye or eyes means the total and irrecoverable loss of the entire sight thereof. Only the largest applicable amount shown above (the largest applicable) will be paid for the Injuries resulting from one accident. The benefit for loss of: a) two limbs; b) both eyes; or c) one limb and one eye is payable only when such loss results from the same accident. If, while covered by this benefit, You are unavoidably exposed to the elements because of a covered accident and suffer a loss for which benefits are payable under this benefit, such loss will be covered. If, while covered by this benefit, You are in an accident resulting in the disappearance, sinking or damaging of an air or water conveyance on which You are covered by this benefit, and Your body has not been found within 52 weeks from the date of the accident, it will be presumed, unless there is evidence to the contrary that You suffered loss of life as a result of those Injuries.

FLIGHT ACCIDENT OPTION

You are eligible for benefits equal to the amount purchased for accidental death, dismemberment or loss of sight as the result of an accident while a passenger on: 1) A regularly scheduled airline flight or regularly scheduled charter operated; in scheduled air transportation pursuant to economic authority issued by the Civil Aeronautics Board; by an intrastate scheduled airline of United States registry maintaining regularly published schedules and licensed for the transportation of passengers by a duly constituted authority having jurisdiction over civil aviation in the state in which said airline operates; or by a scheduled airline of foreign registry maintaining regularly published schedules

and licensed for transportation of passengers by the duly constituted governmental authority having jurisdiction over civil aviation in the country of registry of such airline; 2) Any aircraft, other than a single-engine jet, which at the time is making a flight for the principal purpose of transporting passengers and not for any other operational, tactical or test purpose and which is operated by the Military Airlift Command of the United States, the Royal Canadian Air Force Air Transport Command, or the Royal Air Force Air Transport Command of Great Britain; 3) Any land or water conveyance provided at the expense of the air carrier as a substitute for an aircraft covered by Your Protection Plan; 4) A vehicle licensed to carry passengers for hire, but only when going to an airport to board an aircraft on which You are eligible for benefits under Your Protection Plan; or when leaving an airport after alighting from such an aircraft; 5) Received while upon airport premises designated for passenger use immediately before boarding or immediately after alighting from an aircraft on which You are covered by Your Protection Plan. When You sustain Injuries resulting in any of the following losses within 180 days from the date of the accident, benefits will be paid for the following types of Loss or Injury in the amounts shown:

Type of Loss	Percentage of Benefit Amount
Loss of Life	100%
Loss of both feet	100%
Loss of both hands	100%
Loss of both eyes	100%
Loss of one hand and one foot	100%
Loss of one hand and one eye	100%
Loss of one foot and one eye	100%
Loss of one hand	50%
Loss of one foot	50%
Loss of one eye	50%

Loss of hand or hands, or foot or feet, means severance at or above the wrist joint or ankle joint, respectively. Loss of eye or eyes means the total and irrecoverable loss of the entire sight thereof. Only the largest applicable amount shown above will be paid for the Injuries resulting from one accident. The benefit for loss of: a) two extremities; b) both eyes; or c) one extremity and one eye is payable only when such loss results from the same accident. If, while covered by this benefit, You are unavoidably exposed to the elements because of an eligible accident and suffer a loss for which benefits are payable under this benefit, such loss will be payable under Your Protection Plan. If, while eligible for this benefit, You are in an accident resulting in the disappearance, sinking or damaging of an air or water conveyance on which You are scheduled under Your Protection Plan, and Your body has not been found within 52 weeks from the date of the accident, it will be presumed, unless there is evidence to the contrary, that You suffered loss of life as a result of those Injuries. Flight Accident Option also includes a medical expense feature that pays your Eligible Expenses up to \$50 for each \$1,000 of Your chosen benefit amount. If medical expense occurs within 52 weeks of an eligible accident, You will be paid for Eligible Medical Expenses as well as home health care from a licensed home health agency, but only if continued Hospital care would have otherwise been required; attendance of a registered graduate nurse; x-ray examination; or, use of an ambulance. Loss must occur within 100 days of the accident. To receive benefits, loss must be independent of illness or disease and all other causes.

COLLISION DAMAGE WAIVER

Note: this benefit is not available if traveling to the following countries: Israel, Jamaica, Republic of Ireland or Northern Ireland.

If You rent a car while on the Trip, and the car is damaged due to collision, theft, vandalism, windstorm, fire, hail, flood or any cause not within Your control while in Your possession, the Company will pay the lesser of:

- (a) The cost of repairs and rental charges imposed by the rental company while the car is being repaired; or
- (b) The Actual Cash Value of the car, meaning purchase price less depreciation; or
- (c) The amount shown on the Confirmation of Coverage.

Coverage is provided to You, provided You and Your Traveling Companions are licensed drivers, and are listed on the rental agreement.

PROTECTION PLAN DEFINITIONS

"Additional Transportation Cost" means the actual cost incurred for one-way Economy Transportation by Common Carrier reduced by the value of an unused travel ticket.

"Bankruptcy" means the filing of a petition for voluntary or involuntary bankruptcy in a court of competent jurisdiction under Chapter 7 or Chapter 11 of the United States Bankruptcy Code 11 L.S.C. Subsection 101 et seq.

"Business Partner" means an individual who: a) is involved in a legal general partnership with You; and b) is actively involved in the day-to-day management of Your business.

"Common Carrier" means any public land, air or water conveyance operating under a valid license providing for the transportation of passengers for hire.

"Default" means the inability to provide contracted services due to a material financial failure.

"Economy Transportation" means the lowest published available transportation rate for a ticket on a Common Carrier matching the original class of transportation that You purchased for the Trip, reduced by the value of an unused return travel ticket.

"Eligible Medical Expense" means expense incurred for services and supplies: a) listed below; and b) ordered or prescribed by a Legally Qualified Physician as Medically Necessary for diagnosis or treatment; which are limited to: the services of a Legally Qualified Physician; Hospital or ambulatory medical-surgical center services (this will also include expenses for a cruise ship cabin or hotel room, not already included in the cost of Your Trip, if recommended as a substitute for a hospital room for recovery of Injury or Sickness); transportation furnished by a professional ambulance company to or from a Hospital; and prescribed drugs, prosthetics and therapeutic services and supplies.

"Family Member" means any of the following who resides in the United States, Canada, or Mexico: You or Your Traveling Companion's: legal spouse (or common-law spouse where legal), legal guardian, son or daughter (adopted, foster, step or in-law), brother or sister (includes step or in-law), parent (includes step or in-law), grandparent (includes in-law), grandchild, aunt, uncle, niece or nephew.

"Hospital" means: a) a place which is licensed or recognized as a general hospital by the proper authority of the state or country in which it is located; b) a place operated for the care and treatment of resident inpatients with a registered graduate nurse (RN) always on duty and with a laboratory and x-ray facility; and c) a place recognized as a general Hospital by the Joint Commission on the Accreditation of Hospitals. Hospital does not include an institution licensed or used principally: 1) for treatment or care of drug addicts or alcoholics; or 2) as a clinic, continued or extended care facility, skilled nursing facility, convalescent home, rest home, nursing home or home for the aged.

"Injury" or "Injuries" means accidental bodily injury received after the Effective Date of Your Protection Plan and prior to Your Scheduled Return Date and in loss independently of Sickness and all other causes and certified by a Legally Qualified Physician.

"Intoxicated" means a blood alcohol level which equals or exceeds the legal limit for operating a motor vehicle in the state or jurisdiction where you are located at the time of an incident.

"Legally Qualified Physician" means a physician or a Christian Science Practitioner: a) other than You, a Traveling Companion or a Family Member; b) practicing within the scope of his or her license; and c) recognized as a physician in the place where the services are rendered.

"Medical Treatment" means treatment, advice or consultation by a Legally Qualified Physician.

"Medically Necessary" means a service or supply which: a) is recommended by the attending Legally Qualified Physician; b) is appropriate and consistent with the diagnosis in accordance with accepted standards of community practice; c) could not have been omitted without adversely affecting Your condition or quality of medical care; d) is delivered at the most appropriate level of care and not primarily for the sake of convenience; and e) is not considered experimental unless law requires payment of benefits for experimental service or supplies.

"Pre-existing Condition" means any Injury, Sickness or condition (including any condition from which death ensues) of You, or Your Traveling Companion, You or Your Traveling Companion's Family Member or Your Business Partner which within the sixty (60) day period prior to the Effective Date of Your Protection Plan: a) manifested itself, became acute or exhibited symptoms which would have caused one to seek diagnosis, care or treatment; b) required taking prescribed drugs or medicine, unless the condition for which the prescribed drug or medicine is taken remains controlled without any change in the required prescription; or c) required medical treatment or treatment was recommended by a Legally Qualified Physician. (Note, In California, part "a" is not applicable).

"Published Penalties" means any published cancellation penalties issued by Your travel agency or Travel Supplier that apply to all clients of the travel agency or Travel Supplier and can be documented at time of the sale of the Trip. The loss must occur within the Travel Supplier's penalty period. The maximum amount reimbursable under the travel agencies Published Penalties is 10% of the Trip cost (excluding taxes and other noncommissionable items) or 10% of the amount You have paid, whichever is less. Maximum payable under any one claim is the Trip cost, excluding taxes and other non-commissionable items.

"Scheduled Departure Date" means the date on which You are originally scheduled to leave on Your Trip.

"Scheduled Return Date" means the date on which You are originally scheduled to return to the point of origin or the original final destination.

"Schedule of Benefits" means the benefit confirmation provided to You following enrollment and payment of the applicable cost of Your Protection Plan.

"Sickness" means an illness or disease which is diagnosed or treated by a Legally Qualified Physician after the Effective Date of Your Protection Plan and prior to Your Scheduled Return Date.

"Strike" means any stoppage of work: a) As a result of a combined effect of workers which was unannounced and unpublished at the time travel services were purchased; and b) Which interferes with the normal departure and arrival of a Common Carrier.

"Transportation Expense" means: a) The cost of conveyance of You and any medical personnel (if Medically Necessary); and b) The cost of Medically Necessary services or supplies.

"Travel Arrangements" mean: a) transportation; b) accommodations; and c) other specified services arranged by the Travel Supplier for the Trip.

"Traveling Companion" means a person or persons with whom You a) have coordinated Travel Arrangements and b) intend to travel with during the Trip. Note: a group or tour leader is not considered a Traveling Companion unless You are sharing room accommodations with the group or tour leader.

"Travel Supplier" means any entity or organization that coordinates or supplies travel services for You.

"Trip" means scheduled trips, tours or cruises for which: a) benefits are requested; and b) the required plan cost is submitted prior to the Scheduled Departure Date.

"Usual and Customary Charges" mean those comparable charges for similar treatment, services and supplies in the geographic area where treatment is performed, or services or supplies are provided.

"You" or "Your" means the individual named on the enrollment form who has purchased a Trip and who has paid the required cost for Your Protection Plan.

WHEN YOUR BENEFITS APPLY

Effective Date is the date which begins at 12:01 a.m. following the: 1) postmark date of Your enrollment form or 2) the date You fax or transmit Your enrollment via the internet with the proper payment.

Trip Cancellation Benefit and Assistance Services begin on the Effective Date.

Flight Accident Option Benefit begins on the departure date or the date Your completed enrollment form and fees are postmarked, faxed, or transmitted via the internet. Ends when the trip is completed or after 30 days (unless additional days are purchased), whichever comes first.

Trip Delay Benefit is in force while You are en route to and from Your Trip.

All Other Benefits begin on 12:01 a.m. on Your Scheduled Departure Date or your Protection Plan Effective Date whichever is later, and ends at the point and time of return on or before the Scheduled Return Date. Maximum trip length under ROUNDTRIP is 90 days. For longer trips, contact your agent or Seven Corners.

WHAT BENEFITS ARE NOT PAYABLE - GENERAL

Benefits are not payable for Sickness, Injuries or losses of You or Your Traveling Companion: 1.) Resulting from suicide, attempted suicide, or any intentionally self-inflicted Injury while sane or insane (in Missouri, sane only); 2.) Resulting from an act of declared or undeclared war or occurring while participating in maneuvers or training exercises of an armed service; 3.) Occurring while or resulting from riding, driving or participating in races, or speed or endurance contests; 4.) Occurring while or resulting from mountaineering (engaging in the sport of scaling mountains generally requiring the use of picks, ropes or other special equipment); 5.) Occurring while or resulting from participating as a member of a team in an organized sporting competition; 6.) Occurring while or resulting from participating in skydiving, hang gliding, bungee cord jumping, scuba diving or deep sea diving (in New York, professional scuba - any sport that requires more than on "Open Water 1" certification by PADI, NAUI, or other recognized diving certification organization); 7) any Mental and Nervous disorders, unless hospitalized; 8.) Occurring while or resulting from piloting or learning to pilot or acting as a member of the crew of any aircraft; 9.) Received as a result or consequence of being Intoxicated or under the influence of any controlled substance unless administered on the advice of a Legally Qualified Physician; 10.) To which a contributory cause was the commission of or attempt to commit a felony or being engaged in an illegal occupation; 11.) Due to normal childbirth, normal pregnancy (except complications of pregnancy) or voluntarily induced abortion; 12.) For dental treatment (except as otherwise specifically provided herein); or 13.) Due to a Pre-Existing Condition. Note: Pre-existing Condition limitation is automatically waived for emergency medical evacuation and medical repatriation benefits, and for benefits purchased within 10 days from the time the initial deposit is paid on the Trip. In California, benefits are not payable if, during the 60 days prior to Your Effective Date, a Legally Qualified Physician advises You or Your Traveling Companion not to travel due to Sickness or Injury.

WHAT IS NOT PAYABLE UNDER BAGGAGE/PERSONAL EFFECT OR BAGGAGE DELAY BENEFIT:

Benefits are not payable for loss of any of the following: a) animals, b) automobile or automobile equipment, boats or other vehicles or conveyances, trailers, motors, aircraft, bicycles (except when checked as baggage with a Common Carrier); c) household effects and furnishings, antiques or collectors items; d) sunglasses (prescription or non-prescription) or contact lenses; e) artificial teeth or dental bridges; f) hearing aids; g) prosthetic limbs; h) prescribed medications; i) keys; j) money, credit cards, tickets, documents (except as otherwise specified under the benefit description) or securities; k) stamps; l) professional or occupational equipment or property (whether or not electronic business equipment), telephones or computer hardware or software.

WHAT IS NOT PAYABLE UNDER COLLISION DAMAGE WAIVER

The following exclusions apply to Collision Damage Waiver:

1. Any obligation the Insured assumes under any agreement (except insurance collision deductible);
2. Rentals of trucks, campers, trailers, off-road or four-wheel drive vehicles, motor bikes, motorcycles, recreational vehicles or Exotic Vehicles;
3. Any loss that occurs if the Insured is in violation of the rental agreement;
4. Failure to report the loss to the proper local authorities and the rental car company;
5. Damage to any other vehicle, structure or person as a result of a covered loss.

The following duties in the event of loss apply to Collision Damage Waiver:

1. The Insured must take all reasonable, necessary steps to protect the vehicle and prevent further damage to it;
2. The Insured must report the loss to the appropriate local authorities and the rental company as soon as possible;
3. The Insured must obtain all information on any other party involved in an Accident, such as name, address, insurance information and driver's license number;
4. The Insured must provide the Company all documentation such as rental agreement, police report and damage estimate.

TRAVEL ASSISTANCE SERVICES

The Travel Assistance feature provides a variety of travel related services. Services offered include: Medical evacuation / repatriation · Repatriation of remains · Medical or legal referral · Hospital admission guarantee · Emergency cash advance* · Translation service · Prescription drug / eyeglass replacement* Passport / visa information · Bail bond* · Lost Baggage retrieval · Inoculation information

* Payment reimbursement to the Assistance Company is Your responsibility

For travel assistance services only

CALL TOLL FREE: 800-690-6295 (within the United States and Canada)

OR CALL COLLECT: 317-818-2808 (from all other locations)

Travel assistance services are provided by an independent organization and not by Fairmont Specialty, A Division of Crum and Foster or Seven Corners, Inc. There may be times, when circumstances beyond the Assistance Company's control, hinder their endeavors to provide travel assistance services. They will, however, make all reasonable efforts to provide travel assistance services and help you resolve your emergency situation.

FILING A CLAIM IS SIMPLE

To receive a claim form, contact Seven Corners Administrators, or send Your name, address, travel dates, confirmation number (provided on Your ID Card once You have purchased ROUNDTRIP), and details of Your loss within 30 days to:

Seven Corners

303 Congressional Boulevard

Carmel, IN 46032

800-335-0477 or 317-575-2656

Fax: 317-575-2659

www.sevencorners.com

IMPORTANT: To facilitate prompt claims settlement, You will be asked to provide proof of Your loss. Therefore, be sure to obtain the following as applicable: 1.) For medical claims - detailed medical statements from treating physicians where and when the accident or Sickness occurred as well as receipts for medical services and

supplies; 2.) For baggage and baggage delay claims - reports from parties responsible (i.e. airline, cruiseline, etc.) for loss, theft, damage or delay. Some claims may also require a police report. Please obtain receipts for lost or damaged items; 3.) For trip delay claims - a statement from party causing delay and receipts for expenses; 4.) For cancellation/interruption claims - Your travel invoice, the cancellation or interruption date, original unused tickets/vouchers, the travel organizer's cancellation clause with regard to nonrefundable losses. You will also be asked to provide proof of payment.

No benefits will be paid for any expenses reimbursed to You or services provided to You by any other source. Benefits cannot be duplicated under Your Protection Plan.

Unless You otherwise designate a beneficiary, or in the event the designated beneficiary predeceases You, indemnity for loss of life will be paid to the first of the following surviving beneficiaries: Your spouse; child or children, jointly; parents, jointly if both are living, or the surviving parent, if only one survives; brothers and sisters jointly; or Your estate.

Protection Plan costs are non-refundable after the 10-day review period.

If You have two Protection Plans underwritten by Fairmont Specialty, A Division of Crum and Foster that duplicate benefits, You will be paid up to the highest benefit amount under only one Protection Plan for each Trip. The maximum benefit for Flight Accident Option is \$100,000, \$250,000, or \$500,000 for any one person at any one time.

FOR QUESTIONS AND GENERAL INFORMATION

Contact your agent or Seven Corners

Seven Corners, Inc.

303 Congressional Boulevard

Carmel, IN 46032 USA

800-335-0611 or 317-575-2652

Fax: 317-575-2659

www.sevencorners.com

Monday - Friday 8:00am - 5:00pm Indiana Time.

Benefits under Your Protection Plan are provided by Fairmont Specialty, A Division of Crum and Foster

Notice to Residents of California: Your Protection Plan contains disability insurance benefits or health insurance benefits, or both, that only apply during the Trip. You may have coverage from other sources that already provides You with these benefits. You should review Your existing policies. If You have any questions about Your current coverage, call Your insurer or health plan. The Pre-Existing Condition limitation is waived for Medical Expenses.