

The English version of the Policy Schedule hereunder is for reference only. In the event of any conflict or discrepancy between the Thai and English versions, the Thai version shall prevail and be treated as the legal and correct version for all purposes.

Policy Schedule

Overseas Student Care

Schedule of benefits and services

The most the Company will pay, in any one Period of Insurance, for each Insured Person under this Insurance Policy is the amount stated in the following Schedule of Benefits and Services.

INSURING AGREEMENT / ATTACHMENT	ADVANCED PLAN	INTERMEDIATE PLAN	BASIC PLAN
Loss of Tuition Fees <ul style="list-style-type: none"> Reimburses lost and non-recoverable tuition in case of prolonged hospitalisation, death in the family, terminal disease or having been repatriated to Thailand 	Up to 300,000 Baht	Up to 250,000 Baht	Up to 200,000 Baht
Compassionate visit <ul style="list-style-type: none"> Additional transport for one insured close family member travelling to visit you if you are in hospital for more than five days 	Up to 350,000 Baht	Up to 300,000 Baht	Up to 200,000 Baht
Accident Death & Permanent Total Disablement <ul style="list-style-type: none"> In case of Accident death In case of permanent total disablement due to an accident In case of permanent total loss of sight due to an accident In case of permanent total loss of limb(s) due to an accident 	Up to 3,000,000 Baht	Up to 2,000,000 Baht	Up to 1,500,000 Baht
Overseas Medical Expense Reimbursement <ul style="list-style-type: none"> Medical expenses abroad Medical expenses while visiting Thailand 	Up to 5,500,000 Baht Up to 200,000 Baht	Up to 2,500,000 Baht Up to 200,000 Baht	Up to 2,000,000 Baht Up to 200,000 Baht
Emergency Medical Evacuation & Repatriation Expenses	Up to 5,500,000 Baht	Up to 4,000,000 Baht	Up to 3,000,000 Baht
Loss of / Damage to Personal Baggage and/or Personal Property <ul style="list-style-type: none"> Loss/damage/theft of personal baggage Valuables 	Up to 100,000 Baht Up to 25,000 Baht and 5,000 Baht per single article, pair or set. The maximum benefit payable under this section is 100,000 Baht	Up to 60,000 Baht Up to 25,000 Baht and 5,000 Baht per single article, pair or set. The maximum benefit payable under this section is 60,000 Baht	Up to 40,000 Baht Up to 25,000 Baht and 5,000 Baht per single article, pair or set. The maximum benefit payable under this section is 40,000 Baht
Personal Liability <ul style="list-style-type: none"> Accidental damage caused to a third party 	Up to 1,000,000 Baht	Up to 1,000,000 Baht	Up to 1,000,000 Baht

INSURING AGREEMENT / ATTACHMENT	ADVANCED PLAN	INTERMEDIATE PLAN	BASIC PLAN
Travel Assistance Services			
• Basic Travel Advice concerning the Insured Persons planned trip and information about your intended destination	Available 24 hours	Available 24 hours	X
• Thai or Foreign Embassy Referral	Available 24 hours	Available 24 hours	Available 24 hours
• Flight Schedules	Available 24 hours	X	X
• Visa Information	Available 24 hours	Available 24 hours	X
• Weather Information	Available 24 hours	X	X
• Exchange Rate Information	Available 24 hours	Available 24 hours	X
• Airline Regulations Information	Available 24 hours	X	X
Concierge Services			
• Urgent Message Relay	Included	Included	Included
• Medical Information	Included	Included	Included
• Legal Referral	Included	X	X
• Emergency Family Travel Arrangements	Included	Included	Included
• Hotel Reservations	Included	X	X
• Car Rental Reservations	Included	X	X
• Lost Luggage Retrieval	Included	Included	Included
• Lost Passport Assistance	Included	Included	Included
• Translator / Interpreter Service	Included	Included	X
• Roaming Information	Included	X	X

Overseas Student Travel Insurance Policy

In reliance upon the statements declared in the proposal of Travel Insurance which forms part of this Insurance Policy and in consideration of the premiums paid by the Policyholder or Insured Person, the Company agrees to insure the Insured Person in accordance to the definitions, conditions, insuring agreement, exclusions and attached endorsements of this Insurance Policy.

This Insurance Policy offers coverage for business and/or leisure Trips of employed person(s) and/or non-employed person(s), provided that these person(s) are declared and paid for.

1. Policy Definitions

Unless otherwise stipulated herein, all words and phrases (expressions) which meanings as specially defined elsewhere in this Policy shall have the same meanings as appeared hereunder.

1. **Insurance Policy** means the Schedule, the table of benefit, the general conditions terms and conditions, the insuring agreements, exclusions, provisions, attachments, special provisions, warranties, endorsements and summary of policy terms, general conditions, coverage and exclusions considered as being part of the Insurance Contract
2. **Period of Insurance** means the period from the date the policy comes into force to the date the policy ends, as stated in the Policy Schedule
3. **Company** means the Company issuing this Insurance Policy
4. **Policyholder** means the person named as the policyholder in the Schedule and/or endorsements who has applied for this Insurance Policy for the benefit of the Insured Person
5. **Insured Person** means the person(s) named as the insured person in the schedule and/or endorsements who is/are the insured person(s) under this Insurance Policy and must be from 14 years up to 49 years of age, who have successfully enrolled in Full-time Education, in an educational programme outside of Thailand, in an Educational Institution which is recognized as such by the pertaining authorities in the territory or country in which it is located.
6. **Accident** means an event which happens suddenly from external means giving rise to a result which is not intended or anticipated by the Insured Person
7. **Injury** means bodily injury caused directly by an Accident and happens independently from other causes
8. **Sickness** means symptoms, unusual condition, illness or disease of the Insured Person
9. **Tuition Fees** means Enrollment fees that needed to be paid for the Insured Person to be accepted in the educational programme of the Educational Institution, legal fees for enrollment, necessary expenses for the curriculum and equipment that are included as part of the course. Tuition Fees do not include accommodation expenses, food and drinks nor do these include textbooks, whether necessary or not for the course.
10. **Common Carrier** means Any road, rail, sea or air conveyance operated under a license issued by a governmental authority having jurisdiction, for the transportation of fare paying passengers and which has fixed and established routes only.
11. **Physician** means a person with a medical degree, lawfully registered with The Medical Council and holding a license as a physician in the place in which medical or surgical treatment is given.
12. **Nurse** means a person holding a license as a nurse.
13. **Hospital** means any place providing medical treatment and services, able to accept patients to stay overnight and having space, elements, sufficient medical staff, and also offering the full array of medical services, especially an operating room for major surgery and holding a license as a hospital pursuant to the laws of the treatment place jurisdiction.
14. **Inpatient** means a person who is registered as an inpatient and admitted to a Hospital or Medical Center, diagnosed and under the care of a licensed medical practitioner for not less than six hours, for as much time as the Medical Necessity requires. This also includes a circumstance in which an inpatient dies within 6 hours after being hospitalized.
15. **Medical Center** means any place providing medical treatment and services, able to accept patients to stay overnight and holding a license as a medical center pursuant to the laws of that jurisdiction.
16. **Clinic** means a place with modern treatment capability, holding a license pursuant to the laws, operated by a Physician, offering treatment, and diagnosis but not being able to accept patients overnight.
17. **Family Member** means an Insured Person's spouse; father; mother; legitimate children; actual siblings; parents-in-law.
18. **Terminal Disease** means a disease which spreads around in the body, and is incurable, only the symptoms and effects can be treated and/or made more bearable.
19. **Necessary and reasonable expenses** means Medical Expenses and/or Expenses that are reasonable when comparing these with the price of services in a hospital, a Clinic or Medical Center in general
20. **Pre-existing Condition** means any condition which the Insured Person knew about or received medical care, advice for treatment, diagnosis, consultation or prescribed drugs within 24 months preceding the date that the Insured Person became insured under this Insurance Policy, or a condition for which medical advice or treatment was recommended by a Physician within 24 months preceding the date that the Insured Person became insured under this Insurance Policy.
21. **AIDS** means Acquired Immune Deficiency Syndrome contracted from AIDS virus and from micro-organism, Malignant Neoplasm or contracted disease or illness which the blood result indicating HIV (Human Immunodeficiency Virus) positive. Infection with micro-organism also including but not limited to Pneumocystis Carinii Pneumonia, Organism or Chronic Enteritis, Virus and/or Disseminated Fungi Infection, Malignant Neoplasm including but not limited to Kaposi's Sarcoma, Central Nervous System Lymphoma and/or other diseases currently known as Acquired Immune Deficiency Syndrome or causing sudden death, sickness or disablement. AIDS also includes HIV (Human Immunodeficiency Virus), Encephalopathy Dementia and virus epidemic.
22. **Terrorism** means an act with force or violence and/or threat of a person or any group irrespective of acting solely, for someone or relating to any organization or government with political, religious aim or other similar objectives including an act to frighten the government and/or the public or part of the public.

- 23. Authorized Company** means the solely juristic person that has been authorized by the Company to provide assistance services to the Insured person who is specified in the schedule
- 24. Insurance Policy Year** means Time lapse of one year, counting from the day the policy becomes effective, or after the policy has already been effective for one full year.
- 25. Educational Institution** means an Educational Institution which is recognized as such by the pertaining authorities in the territory or country in which it is located.
- 26. Full-time Education** means enrollment in an educational programme which defines an actual amount of time credits as described in the university or Educational Institution's course offering.
- 27. Accidental damage to the Insured Person** means Bodily Injury due to an Accident which results in Death, Dismemberment, Loss of Eyesight, Disablement or Injury.
- 28. Loss or Damage** means Loss or Damage to the Insured Person's belongings.
- 29. Trip** means a period of travel undertaken by the Insured Person as follows:
- 29.1 Overseas Trip – the policy coverage shall commence on the commencement of the Period Of Insurance or 2 hours before the Insured Person travels out of Thailand whichever is later, and continue until the Insured Person returns to his accommodation in Thailand or within 2 hours after arriving in Thailand or until the end of the Period of Insurance stated in the Policy Schedule, whichever comes first.
- 29.2 Automatic Extension of Period of Insurance – If the Insured Person, during the Period of Insurance receives medical treatment and must continue treatment as an in-patient, the coverage under this Insurance Policy shall be extended until the date the Company or Authorized Company consider that the Insured Person can return to Thailand or the Home Country. Notwithstanding that, the Company is only liable up to the sum insured specified in the Policy Schedule.
- 30. Medical Necessity** means medical services subject to the following conditions:
- 30.1 must be in accordance with the diagnosis and the received treatment must be according to the Injury or Sickness of the Insured Person receiving the service.
- 30.2 must have clear medical indications pursuant to the current modern medical standards.
- 30.3 must not be for the convenience of the person receiving service or his family or of the service provider and
- 30.4 must be proper medical services pursuant to the patient caretaking standards and the Injury or Sickness of the person receiving services.

2. General Conditions

2.1 Insurance Contract

This insurance contract is entered into by the Company in reliance of the Policyholder and/or Insured Person's statements in the Proposal Form and additional statements if any, signed by the Policyholder and/or Insured Person as an evidence of the agreement to insure and whereby the Company issues this Insurance Policy and the summary of policy terms, general conditions, coverage and exclusions.

In the event an applicant misrepresents or omits to inform the Company of any relevant fact, the Company upon being aware

of the true situation, may decide to increase premium or void the policy as per Clause 865 of Civil and Commercial Code.

The Company cannot deny acceptance of responsibility except where there has been material misrepresentation in the aforementioned documents submitted by the applicant.

2.2 Completeness of Contract and Changes in the Insurance Policy

This Insurance Policy together with the Insuring Agreements and Endorsements form the insurance contract. Any change in the wording of the contract must be approved by the Company and endorsed in the Insurance Policy or endorsement before the change is valid and covered under the Insurance Policy.

2.3 Interpretation

In relation to any such dispute arising out of or incidental to this Insurance Policy, such dispute shall be determined in accordance with the Thai law and the parties agree to submit to the jurisdiction of any competent court in Thailand.

2.4 Insurance Period

2.4.1 Commencement of the Insurance Coverage

2.4.1.1 The policy coverage shall commence 2 hours before the Insured Person travels out of Thailand; or

2.4.1.2 On the commencement of the Period of Insurance as specified in the Schedule or Certificate of Insurance whichever is later,

2.4.2 End of the Insurance Coverage

2.4.2.1 The policy coverage shall finish when the Insured Person permanently returns to his accommodation in Thailand; or within 2 hours after arriving in Thailand; or

2.4.2.2 Until the end of the Period of Insurance as stated in the Policy Schedule, whichever comes first.

2.5 Subrogation

In the event of any payment under this Insurance Policy, the Company shall be subrogated to all the Insured Person's rights of recovery thereof against any person or organization and the Insured Person shall execute and deliver instruments and documents and do whatever else is necessary to secure such rights. The Insured Person shall take no action after the loss to prejudice such rights.

2.6 Notification

The Insured Person or the Beneficiary or the representative of the said person, whichever the case may be, must report the Injury or Sickness to the Company without delay. In the event of death, immediate notice must be given to the Company unless it can be proved that the circumstances make it impossible to do so and the notification is given to the Company as early as possible. In all other events – As soon as practicable or latest within 30 days after the loss or damage

Failure to report the loss or damage to the Company within the specified timeframe shall not invalidate any claim if it can be demonstrated that it is not the fault of the Insured Person not to submit the notification/evidence within the timeframe and that the Insured Person sent the notification/evidence as soon as practicable.

2.7 Claim and Proof of Loss

2.7.1 Claim for the Loss of Tuition Fees

2.7.1.1 Completed Claim Form of the Company

2.7.1.2 Original receipt and/or invoices and/or bank statements related to the prepayments and payments to the Educational Institution and for the chosen educational programme

- 2.7.1.3 All the Medical reports containing material symptoms, diagnosis and treatments given and signed by the treating doctor in the case that the Insured Person has been repatriated and/or is terminally ill
- 2.7.1.4 The confirmation by the Educational Institution that the Insured Person has stopped taking courses there
- 2.7.1.5 Legally certified copy of the autopsy in the case of death of the spouse of the Insured Person, its father, its mother, its child(ren) or parents-in-law
- 2.7.1.6 Legally certified copy of the death certificate in the case of death of the spouse of the Insured Person, its father, its mother, its child(ren) or parents-in-law
- 2.7.1.7 Legally certified copy of the deceased's passport or ID card and Copy of the confirmation by the local authority of acceptance of death
- 2.7.1.8 Legally certified copy of the police report certifying death
- 2.7.1.9 Copy of Insured Person's passport
- 2.7.2 Claim for the Loss of Tuition Fees
- 2.7.2.1 Please contact the authorized company;
- 2.7.2.2 Completed Claim Form of the Company;
- 2.7.2.3 All the Medical reports containing material symptoms, diagnosis and treatments given and signed by the treating doctor looking after the Insured Person;
- 2.7.2.4 The confirmation by the treating hospital, clinic or medical center that no family member is available on location to be by the bedside of the Insured Person during the treatment given;
- 2.7.2.5 Original receipt(s) for food, drinks and accommodation from the visiting family member;
- 2.7.2.6 Copy of visiting family members' passport or ID card
- 2.7.2.7 Copy of Insured Person's passport
- 2.7.3 Claim for Permanent Total Disablement Benefits
- The Insured Person must, at his own expenses, give the following evidences to the Company within 30 days from the date of diagnosis by a Physician that the Insured Person suffers permanent total disablement:
- 2.7.3.1 Completed Claim Form of the Company
- 2.7.3.2 Physician report certifying the permanent total disablement
- 2.7.3.3 Copy of Insured Person's passport
- 2.7.4 Claim for Compensation in Case of Death
- The beneficiary must, at the beneficiary's expense, give the following evidences to the Company within 30 days from the date of death:
- 2.7.4.1 Completed Claim Form of the Company
- 2.7.4.2 Death certificate
- 2.7.4.3 Copy of autopsy certified by authorized personnel
- 2.7.4.4 Copy of police report certified by authorized officer
- 2.7.4.5 Copy of personal identification card and the house registration indicating "deceased" status of the Insured Person
- 2.7.4.6 Copy of Insured Person's passport and proof of traveling
- 2.7.4.7 Copy of personal identification card and the house registration of the beneficiary
- 2.7.5 Claim for Medic
- In claiming for medical expenses, the Insured Person, at his own expense, must give the Company the following evidences within 30 days from the date the Insured Person is being discharged from the Hospital or the Medical Center or the Clinic:
- 2.7.5.1 Completed Claim Form of the Company
- 2.7.5.2 Medical report containing material symptoms, diagnosis and treatments given and signed by the treating doctor
- 2.7.5.3 Original receipt and invoice listing itemized medical expenses and the final amount
- 2.7.5.4 Copy of Insured Person's passport
- The receipt showing the expense items must be original. The Company will return the original receipt if it is not fully paid noting the amount already paid so that the Insured Person can claim the amount not yet compensated from other insurance companies, if any. If the Insured received compensation from the government or other welfare schemes, the Insured Person must submit to the Company the certified receipt of the public welfare schemes or other entities in order to claim the remaining amount from the Company in accordance with terms and conditions under this Insurance Policy.
- 2.7.6 Claim for Medical Evacuation and repatriation
- The Insured Person and/or beneficiary and/or people in the immediate entourage of the Insured Person shall follow the advice and/or items as listed below:
- 2.7.6.1 Please contact the authorized company as soon as possible;
- 2.7.6.2 Completed Claim Form of the Company;
- 2.7.6.3 In case the Insured Person requires first aid, emergency first aid should be sought after which the Authorised Company will be coordinating and managing the evacuation and/or repatriation, in agreement and with prior contact with the local medical staff;
- 2.7.6.4 Copy of Insured Person's passport
- 2.7.7 Claim for repatriation of remains
- The Insured Person and/or beneficiary and/or people in the immediate entourage of the Insured Person shall follow the advice and/or items as listed below:
- 2.7.7.1 Please contact the authorized company as soon as possible;
- 2.7.7.2 Completed Claim Form of the Company;
- 2.7.7.3 Sending of the documents as listed in point 2.7.4 above;
- 2.7.7.4 Copy of Insured Person's passport
- 2.7.8 Claim for lost luggage and personal effects (registered with the Common Carrier)
- The Insured Person and/or beneficiary and/or people in the immediate entourage of the Insured Person shall send the following documents in order to be able to claim:
- 2.7.8.1 Completed Claim Form of the Company;
- 2.7.8.2 Documents or written confirmation letter from the Common Carrier including relevant details of traveling in case of claiming under Insuring Agreement(s) Travel Delay, Baggage Delay, Missed Connecting Travel, or Replacement of Business Documents;
- 2.7.8.3 List of damaged/lost items with the pertaining purchase price;
- 2.7.8.4 Copy of Police report certified by authorized officer in case of claiming under Insuring Agreement(s) Loss of Personal Baggage and/or Personal Property, or Loss of Personal Money and/or Personal Document Overseas, or Emergency Cash Advance;

2.7.8.5 Copy of the Insured Person's passport or sufficient evidence of traveling;

2.7.9 Claim for Personal Liability abroad

The Insured Person and/or beneficiary and/or people in the immediate entourage of the Insured Person shall send the following documents in order to be able to claim:

2.7.9.1 Copy of the Insured Person's passport;

2.7.9.2 Completed Claim Form of the Company;

2.7.9.3 Medical report containing material symptoms, diagnosis and treatments given and signed by the treating doctor in case the claim pertains to an accident;

2.7.9.4 Death certificate in case the claim pertains to death;

2.7.9.5 Original receipt(s) of repair and/or repurchase as well as a letter of confirmation in case the claim pertains to damaged goods.

Non-compliance within the specified time shall not jeopardize the right to claim if it can be proved that there is a reasonable explanation why a claim could not be made in a timely manner and that the claim was filed as soon as reasonably possible.

2.8 Medical Examination

The Company has the right to medically examine the Insured Person who is claiming benefit under this Insurance Policy and has the right to conduct an autopsy, within the limits of the law, in case of death, and the expense incurred will be paid by the Company.

2.9 Indemnification

The Company will pay compensation within 15 days from the date the Company receives complete and correct proof of loss or damage. Compensation for death will be paid to the beneficiary while other types of compensation will be paid to the Insured Person.

In the event the Company wishes to investigate a claim for compensation under Insuring Agreement, the time so specified may be extended if necessary but in no event shall this total period be more than 90 days after all documents are received by the Company.

If the Company cannot pay compensation within the above specified period, the Company will be liable for a penalty charge of 15 per cent per annum of the amount of money that must be paid starting from the date the payment becomes due.

If the medical treatment is given by Hospital or the Medical Center or the Clinic outside Thailand, the Company will pay the compensation in Thai Baht by using the exchange rate on the date given on the medical expenses receipt.

2.10 Fraudulent Claims

If the Policyholder, Insured Person, or anyone acting on the Insured Person's behalf, uses fraud or dishonest means to obtain a claim payment under this Insurance Policy or obtain cover for which the Insured Person does not qualify, all benefits under this Insurance Policy will be lost. All benefits claimed fraudulently and received must be paid back to the Company.

2.11 Payment and Return of Premium

2.11.1 The Policyholder or the Insured Person must pay the premium promptly or prior to the commencement of coverage.

2.11.2 In case of Single Trip coverage, there is not entitlement for a premium refund unless there is evidence from the embassy displaying that the Insured Person's visa application is not approved.

In this case, the Insured Person must inform the Company of the visa disapproval prior to the policy effective date.

2.11.3 In case of Annual Trip coverage, The Policyholder or the Company has the right to terminate the Insurance Policy subject to the following conditions:

- a) The Company may terminate this Insurance Policy by sending notice in writing at least 15 days prior to such termination by registered mail to the last known address of the Policyholder as declared to the Company. In such event, the Company shall be liable to refund the premium for unused insured days to the Policyholder on pro-rata basis.
- b) The Insured Person may terminate this Insurance Policy by giving notice in writing to the Company and shall be entitled to receive a refund premium after deducting premium for the period that the Insurance Policy has been in forced according to the Short Period Schedule, provided that the Insured Person confirms in writing that no claim under the Insurance Policy would be made.

Short Period Schedule		
Period of Insurance (Not over / months)	Percentage of Annual Premium	Percentage of Bi-annual premium
1	15	8.6
2	25	14.3
3	35	20.0
4	45	25.7
5	55	31.4
6	65	37.1
7	75	42.9
8	80	45.7
9	85	48.6
10	90	51.4
11	95	54.3
12	100	57.1
13		60.7
14		64.3
15		67.9
16		71.4
17		75.0
18		78.6
19		82.1
20		85.7
21		89.3
22		92.9
23		96.4
24		100.0

The termination of the Insurance Policy under this provision must be made for the whole policy only. Neither party can cancel only part of the coverage during the Period of Insurance.

2.12 Maximum Amount Payable

The Company's total liability for all claims under one or more Insuring Agreement(s) which arise out of any one event or series of related events shall not exceed 100,000,000 Baht, where the company insures more than one person.

2.13 Arbitration

In case of argument, dispute or appeal under this Insurance Policy between the person who has a right to claim under the Insurance Policy and the Company, and if that person desires to settle the disputed claim by use of arbitration, the Company agrees to conform and allow the case to be judged by arbitration according to the Arbitrating Regulation governed by the Office of Insurance Commission.

2.14 Precedent Condition

The Company shall not be liable to compensate under this Insurance Policy unless the Policyholder, Insured Person, the beneficiary or the representatives thereof have complied with the insurance contract and the policy conditions.

2.15 Other Insurance

If at the time a claim is made by the Insured Person under this Insurance Policy there is any other insurance covering the same liability, the Company shall not be liable to pay or contribute any amount other than that which is in excess or otherwise not recoverable from the other insurance.

3. General Exclusions

This insurance shall not cover for any loss or damage or Injury resulting from or arising in connection with or consequent upon or happening at the time of the following:

1. the Insured Person under the influence of alcohol, solvent or drugs, except those drugs as prescribed by a Physician "Under the influence of alcohol" means in case of blood test, there must be alcohol level in the blood from 150 milligram percent and above;
2. mental and nervous disorders, including but not limited to insanity;
3. any claim or expense of any kind which is directly or indirectly caused by, contributed by, or arising from sexually transmitted diseases, Human Immunodeficiency Virus Infection ("HIV"), Acquired Immune Deficiency Syndrome ("AIDS") or any form or variation of HIV or AIDS, however caused;
4. whilst the Insured Person is acting as soldier, police, emergency medical or fire service personnel or volunteering and participating in war or crime suppression;
5. whilst the Insured Person is engaging in motorcycling whether as a rider or passenger, without a valid motorcycle license to ride the motorcycle in the country the Insured Person is traveling in;
6. whilst the Insured Person is participating in a quarrel or fight or involving in provoking a quarrel or fight;
7. whilst the Insured Person is committing a crime or whilst being arrested or fleeing from being arrested, except for claims under Insuring Agreement Bail Bond Facility;
8. the Insured Person not following restrictions, suggestions or recommendations made by the government or other official authorities:
 - against travel to a particular country or parts of a country or
 - about a strike, riot, civil commotion, bad weather, or contagious disease.
9. inability to travel due to financial reasons or mere disinclination to travel or due to the bankruptcy or liquidation of the company providing the Insured Person's transport or accommodation, their agents or any person acting for the Insured Person;
10. war, invasion, act of foreign enemies or warlike act, whether declared or not, civil war, lock-out, insurrection, revolution, riot, strike, civil commotion, coup, declaration of martial law or other situations causing declaration or the continuation of martial law, or Terrorism, hijack and/or steps taken to prevent, suppress, control or reduce the consequences of any actual, attempted, anticipated, threatened, suspected or perceived Terrorism unless specifically listed as covered in the insuring agreement; involvement of the Insured Person in terrorism or being a member of a terrorist organization; involvement in drug smuggling or selling; involvement in nuclear, biological or chemical weapons smuggling;
11. Cancellation, Evacuation and/or Repatriation claims resulting from the closure of frontiers decided by a state or any competent authority representing that state are not covered.

However, the following remain insured:

 - Evacuation and/or repatriation claims resulting from Sickness or Accident occurring within those countries including in the case of riots or civil commotions in which the insured takes no active part. In such cases, the cover shall cease 14 days after the inception of these events.
 - Cancellations resulting from the closure of the frontier of the country or of one of the countries visited during the insured Trip, provided that no alternative solution has been offered by the travel agents or the tour operator, and subject to the closure of the frontiers being declared within 14 days of the departure to this country.
12. ionizing radiation or radioactivity from any nuclear fuel or nuclear waste from the combustion of nuclear fuel and any process of self-sustaining nuclear fission or fusion;
13. explosion of radioactive or nuclear elements or other dangerous material that may give rise to explosion, burning or radiation in the nuclear process;
14. whilst happening in the country or jurisdiction exempted from coverage specified in any endorsement attached to this Insurance Policy (if any).
15. the Insured Person's claim arises because the Insured Person acts illegally or breaks any government prohibition or regulation including visa requirements.
16. suicide, attempted suicide or self-inflicted Injury;
17. any treatment by a Physician if the Physician is the Insured Person, the Insured Person's parent, spouse, child or a person booked to accompany the Insured Person on the Trip, or a person who is related to the Insured Person.
18. childbirth, abortion, or miscarriage (unless the Injury is caused by an Accident covered under this Insurance Policy);
19. whilst the Insured Person is being employed on merchant vessels, engaging in naval, military or air force service or operations or testing of any kind of conveyance or whilst engaging in offshore activities like diving and oil rigging or mining or aerial photography or handling of explosives;
20. whilst the Insured Person is practicing or engaging in professional sports or engaging in sports competitions or preparatory trainings on amateur basis;
21. whilst the Insured Person is engaging in the occupation of flying an aircraft or being a crew member on duty in an aircraft
22. whilst the Insured Person is flying, or getting on or getting off or being on board or traveling as a passenger, an aircraft which is not duly

licensed to carry fare-paying passengers and/or is not a commercial flight;

23. whilst the Insured Person is taking part in racing of all kinds including car, boat and horse racing, ski racing, including jet-ski, skate racing, boxing, parachute jumping (except for the purpose of life saving), boarding or traveling in a hot air balloon or gliding, bungee jumping and scuba diving; boarding or traveling in a hot air balloon or gliding, bungee jumping and scuba diving;
24. a Trip undertaken against the advice of a Physician or for the purpose of obtaining treatment abroad;
25. Pre-existing Conditions
26. the Insured Person having been given a terminal diagnosis
27. Usage of chemical or biological weapons or chemical and biological warfare;
28. whilst the Insured Person is working as a water utility technician; electrician; engine technician; timber/tree worker; professional painter; decorator or builder; installer; doing assembly work; doing maintenance or repair work on hydraulic systems; is working in a very noisy work environment or any other work involving labour or heavy labour. Management work, controlling work, sales work, food making and food and nutrition-related work however, are not excluded.
29. any claim arises from an epidemic or pandemic.

4. The Company or Authorized Company's Intervention

The Company or Authorized Company's interventions are carried out under the national laws and regulations. The Company or Authorized Company's services are subject to the required authorizations by the relevant authorities. The Company and the Authorized Company cannot be held liable for delays in, or prevention of, the agreed services resulting from a case of force majeure or from events such as strikes, riots, civil commotion, restrictions to free circulation, sabotage, terrorist attacks, civil or foreign war, any consequences of a source of radioactivity or of any Act of God.

5. Insuring Agreement

In addition to the definitions, general conditions, insuring agreements, exclusions and attached endorsements of this Policy and in consideration of the premium paid by the Insured, the Company shall provide coverage as follows:

Insuring Agreement 1: Loss of Tuition fees

Cover

This Insurance Policy covers loss of tuition fees in case of:

1. a Hospitalization of more than one consecutive month resulting from either a covered Accident or Sickness;
2. the Insured Person suffering from a Terminal Disease;
3. a medical repatriation; or
4. death of an immediate Family Member, which prevents the Insured Person from continuing his/her studies for the remaining part of a school semester for which Tuition Fees have been paid;

the Company shall reimburse the Insured Person the non-refundable part of the Tuition which have already been advanced to the accredited Educational Institution.

In the event of a claim, only the figures shown on an official invoice (s) from the educational institution for payment of the said Tuition Fees, shall be used as the basis for calculating any reimbursement. In no event shall the reimbursement paid by the Company exceed the maximum amount stated in Schedule of Benefits or Certificate of Insurance of the Policy.

Specific Exclusions

This Insuring Agreement no. 1 coverage does not cover any loss, fatal or non-fatal, directly or indirectly, in whole or in part, caused by or resulting from:

1. Pregnancy;
2. For cosmetic or plastic surgery, except as the result of an accident;
3. For elective surgery, except for emergency and necessary medical expenses;
4. In connection with alcoholism or drug addiction, or use of any drug or narcotic agent;
5. As a result of, or in connection with committing a felony offense, or any attempt thereat.

Insuring Agreement 2: Compassionate visit

In the event the Insured Person is Hospitalized as an Inpatient for more than five (5) consecutive days, due to a covered Injury or Sickness, and his medical condition forbids his repatriation and no adult immediate Family Member is present on-location, the Authorized Company will arrange and provide a round-trip economy class air ticket, or first class railway ticket, to allow an immediate Family Member to be at its bedside. In any event, the Company's reimbursement for daily allowance shall not exceed five thousand (5,000) Baht a day for food/drink and accommodation expenses until the Insured person is discharged from the Hospital, Medical Center or Clinic, and the total reimbursement for the round-trip transport and aforementioned daily allowance shall not exceed the maximum amount or Sum Insured as stated in the Schedule of Benefits or Certificate of Insurance.

Insuring Agreement 3: Loss of Life, Dismemberment, Loss of Sight or Total Permanent Disability due to Accident

Additional Definition Specific to This Section

Dismemberment means loss of limb from the wrist joint or the ankle joint and shall include total loss of use of that limb, which according to the qualified medical practitioner, will never be able to function at any time in the future.

Loss of Sight means complete blindness which is permanently incurable.

Total Permanent Disability means disability to the extent of being unable to perform the normal duty in the Insured Person's regular occupation or any other occupation totally and permanently.

Cover

This Insurance Policy covers any loss or Injury sustained by the Insured Person arising from an Accident, resulting in Loss of Life, Dismemberment, Loss of Sight or Total Permanent Disability within 180 days from the date of Accident or causes the Insured Person to receive continuous medical treatment as an In-patient at a Hospital or Medical Center and suffers loss of life due to that Injury at any time, solely and independently of any other cause, the Company will pay the Insured Person the relevant benefit payable specified in the Schedule of Benefits Payable below.

Schedule of Benefits Payable

For Loss of Life	100% of the sum insured
Total Permanent Disability for at least 12 consecutive months from the date of the Accident unless it can be proved that the Insured Person is permanently disabled.	100% of the sum insured
Loss of both hands from wrist joint, or loss of both feet from ankle joint or Loss of Sight in both eyes.	100% of the sum insured
Loss of one hand from wrist joint and one foot from ankle joint)	100% of the sum insured
Loss of Sight in one eye and loss of one hand from wrist joint	100% of the sum insured
Loss of Sight in one eye and loss of one foot from ankle joint	100% of the sum insured
Loss of one hand from wrist joint	60% of the sum insured
Loss of one foot from ankle joint	60% of the sum insured
Loss of sight in one eye	60% of the sum insured

The Company will compensate only one item of loss which has the highest payable Benefit Amount. During the Period of Insurance, the Company will compensate the loss under this coverage in aggregate not exceeding the sum insured stated in the Policy Schedule. If the Company has not paid the full sum insured, the Company shall provide cover until the end of the Period of Insurance for the remaining sum insured.

Specific Exclusions

This Insuring Agreement no. 3 coverage does not cover any loss, fatal or non-fatal, directly or indirectly, in whole or in part, caused by or resulting from:

1. Bacterial infection other than a bacterial infection occurring from an accidental cut or Injury;
2. Pregnancy, child carriage and childbirth;
3. As a result of, or in connection with committing a crime, a felony offense, or any attempt thereat, or during arrest and detention.

Insuring Agreement 4: Medical Expenses Reimbursement

Cover

While this Insurance Policy is enforced, it shall cover Necessary and Reasonable Expenses occurring for the treatment of Medical Necessity according to Medical Standard as a result of accidental Injury or Sickness sustained by the Insured Person during the Coverage Period, solely and independently of any other cause. The Company will reimburse the Insured Person, up to the sum insured specified in the Policy Schedule for those Necessary and Reasonable Expenses, whether the Insured Person incurs Medical Expenses as an Inpatient or Outpatient.

In case the Insured Person sustains an Accident while Overseas, and it is imperative the treatment is to be performed with the use of herbal medicines, village doctor or acupuncture, which does not involve the breaking or bursting of bones, the Company shall not reimburse more than 1,000 THB per Accident and per Insured Person.

If the Insured Person requires follow-up treatment upon having travelled back to Thailand, he or she shall have undergone treatment within 12 hours upon arrival in Thailand and the Company shall not reimburse Medical Expenses that exceed 10 percent of Sum Insured for this benefit as stated in

the Policy Schedule or Certificate of Insurance or exceed 7 days of ongoing treatment in Thailand, whichever amount is smaller. Medical Expenses in Thailand shall not be reimbursed in case the Insured Person has returned to Thailand following an evacuation and repatriation to Thailand under Insuring Agreement no. 5 of this Policy Wording.

The Company will pay for the following Medically Necessary Expenses:

1. Expenses made for diagnosis, treatment and surgery by a Physician;
2. Expenses for medication, x-ray services, laboratory tests and services, the use of radium and radioactive isotopes, oxygen, blood transfusion, iron lungs, and medical treatment; expenses for the room and surgery board, anesthetics, nursing and other services exclusive of personal services of a non-medical nature or those that exceed the Hospital's average charges, while for hospitalization those charges that exceed those of a semi-private room;
3. Evacuation charges on medically necessary grounds;
4. Medically necessary Medication to take along back home if they do not exceed 14-day usage;
5. Intensive care room or hospital room specific for the ongoing treatment when medically necessary, including daily food and drinks as per the hospital practice;
6. Medical Expenses in Thailand: Coverage is provided during visits to Thailand when visiting in-between study periods, for up to ninety (90) days per twelve (12) months of coverage, or pro rata thereof, for Injury or Sickness which occurs during such visit. Covered Expenses described in items 1-5 above incurred as a result of Injury or Sickness which occurs during such visit will be covered up to a maximum as specified in the Schedule of Benefit or Certificate of Insurance.

In no event shall the total Medical Expenses incurred exceed the limit of sum insured specified in the Policy Schedule.

Specific Exclusions

In addition to the General Exclusions, this Insuring Agreement coverage shall not cover for any loss or damage or Injury or Sickness resulting from or arising in connection with or consequent upon or happening at the time of the following:

1. Chronic disease; sickness or disease that has not healed prior to taking out this Insurance Policy; diagnosing of a disease that the Person Insured was born with or inherited;
2. Recovery or rest cure expenses, physiotherapy expenses; expenses for routine check-up, treatment and/or clean-up;
3. Aids; sexually transmitted diseases;
4. expenses for physiotherapy, and; non-scientific or alternative treatments (homeopathy), chiropractic, acupuncture, herbal medicines;
5. expenses for any implants, prosthesis, apparatus, hearing aids, speech devices and optical expenses;
6. for eye reflections or eye examinations for the purpose of prescribing corrective lenses for eye glasses or for the fitting thereof, unless caused by accidental bodily Injury incurred while insured hereunder; expenses for dental or optical expenses unless incurred as a result of an Accident;
7. medically non-justified treatments and surgical processes
8. for cosmetic or plastic surgery, except as the result of an accident and necessary for the re;
9. any treatment by a Physician if the Physician is the Insured Person, the Insured Person's parent, spouse, child or a person booked to accompany the Insured Person on the Trip, or a person who is related to the Insured Person.
10. for preventive expenses or vaccination expenses;

11. any treatment or medical process which is not medically necessary and cannot be proven so

Insuring Agreement 7: Loss of or Damage to Personal Baggage and/or Personal Property during the Trip

Additional Definitions Specific to This Section:

Personal Baggage or Personal Property means personal goods and property belonging to the Insured Person, or for which the Insured Person is responsible and which is taken by the Insured Person on the Trip and whose item(s) are not excluded in the Exclusions section.

Items to be used in the house means goods or items that are used for household or daily living within your house. These ones usually are not brought along during a Trip, for instance, clothes that are not necessary during the Trip, kitchenware or utensils, items to make life easier within the household and daily living.

Souvenirs means items or goods which are typical of a certain place or reminding of a situation, a specific place, or other items or goods that were purchased as souvenirs.

Pair or set means a number of items of Personal Baggage or Personal Property that belong together or can be used together.

Removal company means a company specialized in removals and the sending and transporting of personal goods and items across the world.

Cover

This Insurance Policy covers if the Insured Person, while the Insurance Policy is on cover, during a Trip by the Insured Person with a Common Carrier, sustains a loss of or damage to Personal Baggage or Personal Property while it is under custody and care of a Common Carrier.

1. The Company shall indemnify the Insured Person in respect of such loss or damage to Personal Baggage and Personal Property up to the sum insured specified in the Policy Schedule. The Company shall not be liable for more than the sum insured (per item limit, Pair or Set limit and maximum limit) specified in the Policy Schedule;
2. In case of loss to Personal Baggage or Personal Property, the Company may elect to repair or replace any part, to restore the pair or set to its value before the loss if the said Personal Baggage or Personal Property is less than one year old; or
3. May elect to repair or replace any part, to restore the pair or set to its value before the loss or pay the difference between the cash value of the property before and after the loss. The Company at its option may make payment subject to due allowance of wear and tear and depreciation for any Personal Baggage or Personal Property that is more than one year old.

Specific Conditions

1. In the event of loss, the Insured Person must report the loss to the Common Carrier within 24 hours upon discovery unless it can be proved that there is a reasonable explanation why a claim could not be made in a timely manner and that the claim was filed as soon as possible and the Insured Person must obtain a written report of such loss Common Carrier and/or additional relevant authority;
2. In the event of any payment under this Insurance Policy, the Company shall be subrogated to all the Insured Person's rights of recovery thereof against any person or organization and the Insured Person shall execute and deliver instruments and documents and do whatever else

is necessary to secure such rights. The Insured Person shall take no action after the loss to prejudice such rights;

3. The Insured Person shall take all reasonable precautions to safeguard all Personal Baggage or Personal Property.

Specific Exclusions

In addition to the General Exclusions, this Insuring Agreement cover shall not cover the following:

1. animals, automobiles (including accessories), vessels, sports equipment, other vehicles, fruits, food, Items to be used in the house, antiques, artifacts, glass, gold, precious stones, china porcelain, marble, earthenware or other brittle objects, paintings, objects of art, musical instruments, glasses (lenses and frames), Souvenirs, contact lenses, hearing aids, prosthesis (unless as part of aids from a covered accident), personal documents, important papers with financial value, stamps, Personal Money, credit cards, SIM cards and keys, computer equipment; loss of or damage to jewellery or watches, which are not kept on the Insured Person, unless they are locked in a safe or safety deposit box, food, consumables, fruit;
2. This coverage does not apply to property, loss or damage of personal baggage and personal property in the following cases:
 - 2.1 loss or damage caused by wear and tear, scratches, stains, atmospheric or climatic conditions, gradual deterioration, leakage of liquids, greasy, coloring or corrosive substances being part of the baggage, mechanical or electrical failure, insects, vermin, inherent vice or damage sustained due to any process or while actually being worked upon resulting there from;
 - 2.2 loss or damage to rented equipment or given for rent;
 - 2.3 goods or items seized or confiscated or destroyed by government or another authority, under quarantine or custom regulation;
 - 2.4 goods or items smuggled via contraband or pertaining to illegal trade;
 - 2.5 Personal Baggage or Personal Property, goods or items and/or partial or total loss and damage that can be recovered via other means or insurance, for instance goods or items insurance, Removal Company insurance or that of the Common Carrier;
 - 2.6 loss of or damage to Insured Person's Personal Baggage or
 - 2.7 loss of or damage to Personal Baggage or Personal Property which is left unsecured and unattended at any time;
 - 2.8 loss of or damage to business goods or samples;
 - 2.9 hearing aids, electronic/digital data stored in electronic devices, or similar items;
 - 2.10 loss or damage occurring in Thailand, except theft, loss or damage caused by the airline or its representatives;
 - 2.11 purchases made after arriving at the final destination mentioned on the airline ticket;
 - 2.12 loss or damage without breaking and entering or with skeleton keys;

Insuring Agreement 13: Personal Liability

Cover

This Insurance Policy covers if an event occurs during the Trip, for which the Insured Person shall become legally liable to pay damages, and the Company will indemnify the Insured Person in respect of damages for

- a) death or accidental bodily Injury to any third party person;
- b) accidental loss of or damage to property of any third party person.

The Company will also indemnify the Insured Person for:

- a) all costs and expenses recoverable by a claimant from the Insured Person;
- b) all costs and expenses incurred with the written consent of the Company;
- c) all costs and expenses incurred from the legal process and proceedings.

The liability of the Company in respect of any one occurrence or a series of occurrences consequent upon or attributable to any one source or original source during the Trip shall not exceed the limit of sum insured specified in the Policy Schedule.

Specific Conditions

1. If in respect of any occurrence or claim under this Insurance Policy, there is any other insurance policy applicable to such occurrence or claim, the Company shall not be liable to contribute hereunder more than its ratable proportion of any compensation, costs, charges or expenses.
2. No admission, offer, promise, payment or indemnity shall be made without the written consent of the Company.
3. Every letter, claim, writ, summon and notice of any prosecution or inquest in connection with any circumstance which may give rise to a claim or loss shall be forwarded to the Company upon receipt.

Specific Exclusions

In addition to the General Exclusions, this Insuring Agreement coverage shall not cover the following:

1. liability of the Insured Person to third party for any loss or damage arising from any willful or malicious or illegal act of the Insured Person;
2. claims directly or indirectly caused by or arising from or arising in consequence of:
 - 2.1 rendering of or failure to render any professional service or any omission thereof;
 - 2.2 carrying on of any trade, business or profession of the Insured Person;
 - 2.3 any use of any firearm or weapon;
 - 2.4 taking part in any dangerous activity unless extended under this policy;
 - 2.5 ownership, possession or use of any mechanically propelled vehicle and any trailers attached to the vehicle, aircraft or watercraft;
 - 2.6 ownership, possession or use of any land or building, except for the purpose of accommodation the Insured Person is using during the Trip;
 - 2.7 sexual harassment, physical or mental abuse;
 - 2.8 any form of land, water or air pollution and contamination;

3. Employer's Liability, liability to any person under a contract of employment or apprenticeship with the Insured Person;
4. liability assumed by agreement which would not have been attached in the absence of such agreement;
5. legal liability arising from acts of animals (except dogs, cats or horses) which are under the care, custody and control of the Insured Person;
6. accidental death, bodily Injury or loss of or damage to property of any member of the Insured Person's family or with whom the Insured Person resides;
7. loss of or damage to property belonging to or held in trust by or in the custody or control of the Insured Person;
8. Fines and penalties.

Insuring Agreement 9: Emergency Medical Evacuation and Repatriation Expenses

Additional Definitions Specific to This Section:

Emergency Medical Evacuation means

- 1.1 emergency transportation of the Insured Person from the location where the Insured Person suffers accidental Injury or Sickness to the nearest suitable Hospital where appropriate medical treatment can be obtained; or
- 1.2 after initial treatment at a local Hospital, the Insured Person's medical condition warrants transportation to a Hospital or the Insured Person's Home in Thailand for further medical treatment or recovery.

Covered Expenses means expenses for transportation, medical services and medical supplies necessarily incurred in connection with the Emergency Medical Evacuation of the Insured Person. All transportation arrangements and expenses, medical supplies and services made for Emergency Medical Evacuation of the Insured Person must be approved and arranged by Authorized Company.

Repatriation means the necessary arrangements for the return of the Insured Person's mortal remains to his/her Home in Thailand or Home Country in the event of the Insured Person's death.

Cover

Emergency Medical Evacuation

This Insurance Policy covers Emergency Medical Evacuation of the Insured Person, as a result of accidental Injury or Sickness sustained by the Insured Person during a Trip. If according to the opinion of Authorized Company, it is judged medically appropriate to move an Insured Person to another location or return to Thailand for medical treatment, Authorized Company shall arrange for Emergency Medical Evacuation utilizing the means best suited to do so, based on the medical severity of the Insured Person's condition. The Company shall pay directly to Authorized Company the Covered Expenses for such Emergency Medical Evacuation.

The means of Emergency Medical Evacuation arranged by Authorized Company may include air ambulance, surface ambulance, regular air transportation, railroad or any other appropriate means.

All decisions as to the means of transportation and the final destination will be made by Authorized Company, and will be based solely upon Medical Necessity.

Repatriation Expenses

This Insurance Policy covers Repatriation arrangement of the Insured Person's mortal remains to his/her Home in Thailand or Home Country if the Insured Person dies as a result of accidental Injury or Sickness during

the Trip. The Company shall pay directly to Authorized Company the covered expenses for such Repatriation.

For the return of the mortal remains to the Home Country, other than Thailand, the Company shall not be liable for expenses in excess of expenses that would be deemed to have incurred for Repatriation back to Thailand.

The Company shall reimburse to the Insured Person's Estate expenses actually incurred for services and supplies provided by mortician or undertaker, including but not limited to the cost of casket, and cost of burial or cremation but not including funeral ceremonies or rituals.

In no event shall the total Emergency Medical Evacuation and Repatriation Expenses incurred exceed the limit of sum insured specified in the Policy Schedule.

Specific Conditions

The Company has appointed Authorized Company to help the Insured Person with any Overseas medical emergency. The conditions of using Authorized Company are provided below:

1. Decisions are taken solely in the Insured Person's medical interest.
2. Authorized Company's doctors and/or medical personnel shall contact the local medical facilities and, if needed, the Insured Person's usual doctor to collect information allowing Authorized Company to take the decisions best suited to the Insured Person's health condition.
3. The Insured Person accepts that the Insured Person's evacuation is decided and managed by medical personnel of Authorized Company with officially acknowledged qualifications in the said personnel's country of usual practice.
4. Authorized Company interventions are carried out under the national and international laws and regulations. Authorized Company's services are subject to the required authorizations by the relevant authorities.
5. In case of any refusal on the Insured Person's part to comply with the decisions taken by Authorized Company means the Insured Person

exempt the Company and Authorized Company from any liability concerning the consequences of such an initiative and the Insured Person will then lose all the Insured Person's rights to the services of Authorized Company and the indemnities from the Company.

6. Where Authorized Company has provided an assistance service, the Company will become the owner of the original transport ticket(s) and the Insured Person will undertake to send the ticket(s) to Authorized Company or reimburse the Company the amount recovered from the organization having issued the transport ticket(s). If the Insured Person had not purchased any ticket for the Insured Person's return journey, the Company reserves the right to claim from the Insured Person the expenses that the Insured Person would necessarily have incurred for the return journey.

Specific Exclusions

In addition to the General Exclusions, this Insuring Agreement coverage shall not cover for any loss resulting from or arising in connection with or consequent upon or happening at the time of the following:

1. any expense for a service not approved and arranged by Authorized Company, except that this exclusion shall be waived in the event the Insured Person cannot for reasons beyond his control notify Authorized Company during an emergency medical situation. In any event, the Company reserves the right to reimburse the Insured Person only for those expenses incurred for services which Authorized Company would have provided under the same circumstances and up to the sum insured specified in the Policy Schedule;
2. Medical Insurance and Medical Assistance Exclusion: Your claim arises from an Epidemic or Pandemic.