

Consult the résumé of the Trip Cancellation
and Interruption & Baggage Protection.

In reference to policy effective: September 15, 2026

Schedule of Benefits

List of Benefits	Maximum Sum Payable (per Insured Person)
Emergency Medical Expenses, including: • Hospital/Medical Expenses • Physician Fees • Medical Appliances • Diagnostic Fees • Ambulance Services • Emergency Transportation to Insured Person's Bedside • Prescription Drugs for Emergency Treatment • Return of Deceased	CAD \$1,000,000
• Incidental Hospital Expenses	Maximum CAD \$100
• Private Duty Nursing Care	Maximum CAD \$5,000
• Emergency Dental Care	Maximum CAD \$500
• Paramedical Fees	50%, up to CAD \$300
• Delayed Return Expenses	CAD \$300
Emergency Medical Evacuation & Repatriation	CAD \$100,000
Emergency Medical Expenses relating to a pandemic or epidemic	Included

Please refer to the policy for more detailed information on the insured risks, exclusions, and benefits.
In case of disparity between this document and the policy wording, the latter prevails.

Your Representative:

AwayCare
580-B Middle Side Road
Amherstburg, ON, N9V 3R3
Tel.: 1-800-667-7267



brokers@awaycare.ca
awaycare.ca

The BermudAir Trip Protector Plus is underwritten by:



Humania Travel Insurance
247 Thibeau Boulevard, Trois-Rivières, QC, G8T 6X9
Tel.: 1-877-344-8398
Fax: 1-819-377-6069

info@humaniatravelinsurance.ca
humaniatravelinsurance.ca

BermudAir Trip Protector Plus / Travel Insurance in case of Medical *Emergency* is offered to Canadian residents who meet the eligibility conditions and who travel out of their province of residence for a maximum of 30 days.

Eligibility Conditions

You are eligible for coverage if You meet all of the following conditions:

- You are a *Canadian Resident*; and
- You are eligible for benefits under *Your Provincial Government Health Insurance Plan*; and
- You understand and can speak either one of Canada's official languages (English or French); and
- You are aged 85 years or younger on the *Departure Date*.

Premium Calculation

Premiums of the protection in case of Medical *Emergency* are calculated upon:

- *Your age on the Departure Date*;
- The exact number of days of *Your Trip*;
- *Your destination*.

Premiums are subject to change without notice. Travel medical insurance is exempt of tax and can be calculated as medical expenses in *Your income tax report*. *Your Travel Insurance Confirmation* will act as *Your tax receipt*.

IMPORTANT

- I understand that if I do not meet the eligibility and the policy requirements of the policy, the *Insurer* may deny my coverage and render my policy null and void.
- All of the numbered pages of the *Confirmation of Coverage* are an integral part of *Your policy*. Subject to the terms and conditions of the policy, the benefits payable are subject to the policy being purchased and paid in full before *Your Departure Date* from *Your province of residence*. *Your Confirmation of Coverage* and a copy of the policy will be sent to you by email following payment of *Your premium*. A specimen of the policy can be consulted under section "Documentation" of the website www.humaniatravelinsurance.ca.
- **Following the purchase of *Your travel insurance*, You must carefully review *Your Confirmation of Coverage*, as the document reflects the information You provided.**
- **Travel insurance covers claims arising from sudden and unexpected situations (i.e.: *Accidents and Emergencies*) and typically not follow-up or recurrent care.**
- If You fail to call the Emergency Assistance prior to any *Treatment*, the *Insurer* will deny the claim or limit the reimbursement to the lesser of charges that would have been incurred within its network of medical providers or 70% of the eligible expenses incurred.
- The policy contains a provision removing or restricting the right of the *Insured Person* to designate persons to whom or for whose benefit insurance money is to be payable.

Important definitions

The meanings of words printed in *italics* throughout our documents are explained in the "Definitions" section of the policy. Here are a few examples. Read the policy for details on all of our defined words.

"Change in the prescribed Medication" - Means the dosage or frequency of a *Medication* has been reduced, increased, stopped and/or new *Medications* have been prescribed due to the worsening of an underlying condition that is being treated with the *Medication*, unless the change is:

- a) Between a brand name and a generic *Medication* with comparable dosage; or
- b) An adjustment to insulin or anticoagulant dosage.

"Emergency" - Means a sudden and unforeseen *Medical Condition* that requires immediate *Treatment*. An *Emergency* no longer exists when the evidence based on the opinion of the Emergency Assistance indicates that no further *Treatment* is required at destination or You are able to return to Your province of residence for further *Treatment*.

"Pre-existing Medical Condition" - Means:

- a) Any illness, disease or *Injury* You suffer from, which in the one (1) year period before You purchased this insurance:
 - (i) First manifested itself, worsened, became acute or exhibited *Symptoms* that would have caused an ordinarily prudent person to seek diagnosis, care or *Treatment*;
 - (ii) Required prescribed *Medication* or medicine, tests, or further investigation had been recommended by a *Physician*; or
 - (iii) Was treated by a *Physician*, or *Treatment* had been recommended by a *Physician*.
- b) Any congenital, hereditary, chronic or ongoing condition of Yours which You are aware of, or could reasonably be expected to be aware of, before You purchased this insurance.

This definition does not apply to a *Medical Condition* which is treated or controlled solely through the taking of prescription drugs or medicine and remains treated or controlled without any adjustment or *Change* in the prescribed *Medication* throughout the 365-day period before coverage is effective under this policy.

"Treatment" - Means a procedure prescribed, performed or recommended by a *Physician* for a *Medical Condition*, including but not limited to prescribed *Medication* (including *Medication* prescribed "as needed"), investigative testing and surgery.

Exclusions and limitations

The policy contains exclusions and limitations. Here are a few examples. Read the policy for details on all of the exclusions and limitations that could affect *Your coverage*.

We will not be liable under any section of the policy for any claim arising out of, based upon, relating to, or attributable to, for example:



Your Pre-existing Medical Conditions:

1. Any *Pre-existing Medical Condition* or any complication arising from it.
2. Any *Treatment* not authorized by the Emergency Assistance, or not considered to be an *Emergency* as defined in this policy. (See a list of examples in the policy.) Also, any *Treatment* that could reasonably be delayed until the *Insured Person* returns to his/her province of residence even if the perception is that the care may be of less accessibility and quality in the province of residence..
3. If the Medical Assistance decides that *You* should transfer to another facility or the Emergency Assistance Medical Director determines that *You* can return to *Your Home* or to *Your Country of Residence* for *Treatment* (by the most appropriate transport option), and *You* choose (or a member of *Your* family chooses) not to, benefits will not be paid for this *Treatment* and any further medical *Treatment*. The contract will be terminated and the *Insurer* will be relieved of any further liability.
5. Any continued *Treatment*, *Recurrence* or complication of a *Medical Condition* or any direct or indirect complication that may occur, if Emergency Assistance determines that *Your Emergency* has ended.



The intent of Your Trip:

7. Any *Recurrence* or direct or indirect complication of a *Medical Condition* for which *You* have chosen to be investigated or to receive a *Treatment*, a surgery, palliative care, or any other form of therapy during *Your Trip* and that was not related to an *Emergency*, no matter if the *Trip* was undertaken under the recommendation of a *Physician* or not.
8. Any *Medical Condition* or *Symptoms* for which it is reasonable to believe or expect that *Treatments* will be received during *Your Trip*.



Other risks:

17. Any costs relating to pregnancy if *You* are more than 26 weeks pregnant at the start of or during *Your Trip* (including routine pre-natal care, childbirth), infertility or fertility treatment, deliberate termination of *Your* pregnancy, contraception or operations related to sterilisation or any complication arising therefrom.
18. Any costs related to an infant born during *Your Trip*.
20. *Your* participation in a high-risk activity. (See exclusions 20 and 21 in the policy for more details.)
24. Any event or claim pertaining to (...)
 - f) The reason for which the Government of Canada (www.travel.gc.ca) issues a travel advisory to avoid all travel or to avoid all non-essential travel to a country, region or city, if the advisory is in effect on *Your Departure Date*. (...) It is *Your* responsibility to verify the status of *Your* destinations. (Please read the complete exclusion in the policy for more details.)

10-Day free look to review this policy

You have 10 days from *Your* insurance purchase date to review this policy. If it does not meet *Your* needs, You may terminate this insurance coverage and receive a premium refund if:

- (i) You have not departed on *Your Trip*; and
- (ii) there is no claim in progress.

To request a premium refund, simply contact *Your Travel Supplier* from whom You purchased the insurance, as identified on *Your Confirmation of Coverage*.



IMPORTANT: The policy must be purchased and paid in full before *Your Departure Date* from *Your* province of residence. Premiums are subject to change without notice.

How to file a claim

Required documentation must be received no later than 90 days after You return to *Your* province of residence from *Your Trip*. Cash register coupons (stubs) will not be accepted for reimbursement. Any fees for the completion of medical certificates or claims forms are not covered by the *Insurer*.

It may be required that You pay providers directly. Coordination of care through the Emergency Assistance will expedite reimbursement.

All claim forms are available online at www.humaniatravelinsurance.ca or by calling 1-833-268-0550.

In the event of a dispute over the reimbursement of a claim, the *Insured Person* must request in writing that the revision committee reassess the claim before taking any legal action. The request must be sent in writing 30 days of the receipt of the written position from the *Insurer*. The committee will take into consideration all pertinent information provided by the *Insured Person* and a decision, based on the insurance policy provisions and conditions, will be rendered in writing within thirty (30) days of the receipt of the revision request.

Send requests for claim revision to:

CLAIMS REVIEW COMMITTEE
Humania Travel Insurance
247 Thibeau Blvd
Trois-Rivières (Quebec) G8T 6X9

If You wish to file a complaint to the *Insurer*, please read the procedure and our Complaint Review policy under "Make a complaint" at the bottom of www.humaniatravelinsurance.ca.

Appendix

Notice of cancellation of an insurance contract

Notice given by a firm

Section 64 of the Insurers Act (2018, chapter 23, section 3)

The Insurers Act gives you important rights.

- The Act allows you to rescind an insurance contract, **without penalty**, within 10 days of the date on which it is signed. However, the insurer may grant you a longer period.
- To rescind the contract, you must give the insurer notice, within that time, by registered mail or any other means that allows you to obtain an acknowledgement of receipt.
- Despite the rescission of the insurance contract, the first contract entered into will remain in force. Caution, it is possible that you may lose advantageous conditions as a result of this insurance contract; contact your distributor or consult your contract.
- After the expiry of the applicable time, you may rescind the insurance contract at any time; however, penalties may apply.

For further information, contact the Autorité des marchés financiers at 1-877-525-0337 or visit www.lautorite.qc.ca/en.

Notice of rescission of an insurance contract

To: Humania Travel Insurance
247 Thibeau Boulevard, Trois-Rivières, QC, G8T 6X9

Date: _____
(date of sending of notice)

Pursuant to section 64 of the Insurers Act, I hereby cancel the insurance contract:

No: _____
(number of contract, if indicated)

Entered into on: _____
(date of signature of contract)

In: _____
(place of signature of contract)

_____ (name of client)

_____ (signature of client)

Consult the résumé of the protection in case of Medical Emergency

In reference to policy effective: September 15, 2026

Schedule of Benefits

List of Benefits	List of Benefits
Trip Cancellation - Before Departure	Up to the Sum Insured, Maximum CAD \$20,000
Cancel For Any Reason	75% , max CAD \$5,000
Trip Interruption - After Departure	Up to the Sum Insured, Maximum CAD \$20,000
Additional Accommodation and Meals	CAD \$150 per day, Maximum 2 days
Baggage and Personal Effects Loss, Theft or Damage	Maximum CAD \$1,000 Max CAD \$300 per item, <i>Pair or Set of Items</i>
Baggage and Personal Effects Delay	Maximum CAN \$300

 IMPORTANT NOTICE

Coverage will only be in-force upon receipt of the full payment of the premium by the *Insurer* and if *You* meet the eligibility conditions of the policy; otherwise the *Insurer* could render your policy null and void. The non-medical travel insurance protection covers *You* for specific risks, as described in the policy. The policy has exclusions and limitations, such as for any *Pre-existing Medical Condition* or any complication arising from it.

Your Representative:

AwayCare
580-B Middle Side Road
Amherstburg, ON, N9V 3R3
Tel.: 1-800-667-7267



brokers@awaycare.ca
awaycare.ca

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Fax: 1-819-377-6069

info@humaniatravelinsurance.ca
humaniatravelinsurance.ca

Eligibility Conditions

To be eligible for the Trip Cancellation and Interruption Plan, *You* must:

- Be a *Canadian Resident*;
- Have purchased the insurance within 5 days of the first non-refundable deposit of *Your Trip*; and
- Be 85 years or younger.

Maximum coverage is CAN \$20,000.

Maximum trip length is 30 days including the *Departure Date* and *Expiration Date*.

Premium Calculation

Premiums are calculated upon:

- *Your age on the Effective Date*;
- The covered amount;
- *Your destination*.

Premiums are subject to change without notice. Travel non-medical insurance is subject to a sales tax of 9.975%.

Effective and Termination Dates of the Coverage

The Trip Cancellation coverage starts when *You* are named on the *Confirmation of Coverage* and when *Your* full premium has been paid.

The Trip Cancellation coverage ends on the earliest of:

- a) The date *You* cancel *Your Trip*; or
- b) The date *Your Trip* commences.

The Trip Interruption coverage starts when *Your Trip* commences.

The Trip Interruption coverage ends on the earliest of:

- a) The date *You* return to *Your Home* or *Your Country of Residence*; or
- b) *Your Scheduled Return Date*.

The Travel Insurance Confirmation

The *Confirmation of Coverage* is an integral part of the policy. *Your Confirmation of Coverage* and a copy of the policy will be sent to *You* by email following payment of *Your* premium. A specimen of the policy can be consulted under section "Documentation" on www.humaniatravelinsurance.ca.

Protections

For Baggage and Personal Effects

We will pay up to the amount shown in the Schedule of Benefits to replace or repair items *You* own (not that *You* have borrowed or rented), of the type usually carried or worn by travellers, in the event such items are lost, stolen or accidentally damaged during *Your Trip*. (...)

We will pay up to the amount shown in the Schedule of Benefits for the purchase of necessary and essential missing clothing and toiletries if, during *Your Trip*, *Your* personal baggage is delayed or misdirected for at least twelve (12) hours by a *Covered Transport* before returning to *Your Departure Point*.

For Trip Cancellation (pre-departure)

If it is necessary and unavoidable that *You* have to cancel *Your Trip* before *Your Departure Date* as a result of one (1) or more of the Insured Risks (see Section B of the policy), We will pay up to the sum insured, as per *Your Confirmation of Coverage* for:

- Travel and accommodation expenses for *Your Trip* purchased through *Your Travel Supplier's* website and for which *You* opted to purchase insurance, which *You* have paid and are non-refundable;
- The cost of excursions, tours and activities purchased through *Your Travel Supplier's* website which *You* have paid for and which are non-refundable; and
- The cost of entry visas required for *Your Trip* which *You* have paid for and which are non-refundable.

For Trip Interruption (after departure)

If it is necessary and unavoidable that *You* have to alter *Your Trip* after *Your Departure Date* as a result of one (1) or more of the Insured Risk (see Section B), We will reimburse up to the sum insured, as per *Your Confirmation of Coverage*.

Following the cancellation or interruption of a *Trip*, *You* are entitled to a reimbursement of losses incurred according to:

- The Insured Risks outlined below; and
- The maximum sum insured indicated on *Your Confirmation of Coverage*.

Insured risk

The Trip Cancellation & Interruption Plan contains limitations and exclusions, and cover specific risks outlined in the policy. Here are a few. Read the policy for more details.

A maximum benefit of the sum insured indicated on *Your Confirmation of Coverage* is provided to cover the specific losses, listed in section called "Covered Benefits" in the policy, which result from the cancellation or interruption of *Your Trip* due to one of the following insured risks:

1. Medical Conditions and Death
2. Pregnancy and Adoption
3. Government Advisories
4. Employment and Occupation
5. Other Covered Risks

Important definitions

The meanings of words printed in *italics* throughout our documents are explained in the “Definitions” section of the policy. Here are a few examples. Read the policy for details on all of our defined words.

“Covered Transport” - Means any land, water or air conveyance operating under a valid license for conveyance of fare paying passengers and which operates to fixed, established and regular schedules and routes.

“Your Confirmation of Coverage”- Means the date on which *You* are scheduled to start *Your Trip* as shown in *Your Travel Insurance Confirmation*.

“Effective Date” - Means:

For Baggage coverage: the *Departure Date*.

For Trip Cancellation coverage: the date *Your* policy is purchased and premium is paid.

For Trip Interruption coverage: the date *Your Trip* commences.

“Medical Condition” - Means items of personal property which belong together and cannot be worn or used or work separately for the purpose intended (for example, a pair of earrings).

“Pair or Set of Items” - Means any disease, *Sickness or Injury* (including *Symptoms* of undiagnosed conditions).

“Travelling / Travel Companion” - Means the person or persons with whom *You* have coordinated Travel Arrangements and with whom *You* intend to travel for at least 80% of *Your Trip* duration, and without whom *You* reasonably would not undertake the *Trip*.

“Valuables and Electronic/Other Equipment” - Means photographic, audio, video, electronic, electrical equipment, media (including CDs, DVDs, video and audio tapes and electronic games), MP3 players, computer equipment (but not mobile or smart phones or tablets), binoculars, antiques, jewellery, watches, furs, silks, precious stones and articles made of or containing gold, silver or precious metals.

10-Day free look to review this policy

You have 10 days from *Your* insurance purchase date to review this policy. If it does not meet *Your* needs, *You* may terminate this insurance coverage and receive a premium refund if:

- (i) *You* have not departed on *Your Trip*; and
- (ii) there is no claim in progress.

To request a premium refund, simply contact *Your Travel Supplier* from whom *You* purchased the insurance, as identified on *Your Confirmation of Coverage*.

After the 10-Day Free Look, refund of premium is not available.



IMPORTANT: For benefits to be payable under this policy, required premium payment must be received prior to *Your Departure Date*.

Exclusions and limitations

The policy contains exclusions and limitations. Here are a few. Read the policy for more information and to be aware of all the exclusions and limitations that could affect *Your* coverage.

The policy does not cover losses or expenses arising out of, based upon, or attributable to, for example:



Your medical conditions:

1. Any *Pre-existing Medical Condition* or any complication arising from it.
6. Any mental, psychiatric, psychological, psychotic or nervous *Medical Condition*, including but not limited to depression, anxiety and insomnia, unless *You* are hospitalized for that condition.



The reason for the claim:

2. Any *Medical Conditions* or events that *You* are aware of when *You* book *Your Trip*, which might reasonably be expected to prevent *You* from travelling as booked or if *You* have decided to travel against the advice of a *Physician*.
17. *Financial Default* of a retail travel agent, agency, tour operator, airline, cruise line or broker.
19. Losses recovered or which are recoverable from any other source, including but not limited to, any government program, compensation fund, any private insurance, or any insurance from any other third party, in which cases this insurance acts as second payer.



The intent of Your Trip:

5. A *Trip* undertaken for the purpose of obtaining a diagnosis, on the recommendation of a *Physician* or not, *Treatment*, surgery, investigation, palliative care, or any alternative therapy, as well as any directly or indirectly related complication.



Other risks:

11. *Your* participation in (a sport or activity deemed risky by the *Insurer*, such as *Extreme Sports* and *Sporting Activities*, competition sports, any professional sport, parachuting, *Mountain Climbing*, etc. See the exclusion in the policy for more details.)
25. Any costs *You* would have still had to pay even if *You* had not been due to travel, such as time share management fees or holiday club membership fees.



Baggage and personal effects:

1. Property *You* leave *Unattended* in a *Public Place*.
4. Any claim for loss, theft or damage to personal belongings and baggage which *You* do not report to the relevant airline or transport company or service provider within twenty-four (24) hours of discovering it and which *You* do not get a written report for. In the case of an airline, a property irregularity report will be required from the airline. If the loss, theft or accidental damage to *Your* property is only noticed after *You* have left the airport, *You* must contact the airline in writing with full details of the incident within seven (7) days of leaving the airport and get a written report from them.
5. Any loss, theft or damage to *Valuables and Electronic/Other Equipment* which *You* do not carry in *Your* hand luggage while *You* are travelling on *Your Covered Transport* or on an aircraft.
15. Any claim for loss of, theft or damage to, in respect of *Winter Sports*, water sports or golf equipment.

How to file a claim

Trip Cancellation and Interruption

When submitting *Your* claim please include the following:

- a) An official contract stipulating clearly the booking, cancellation and interruption conditions along with the corresponding penalties applicable, if any.
- b) A medical document fully completed and signed by a legally qualified *Physician* in the locality where the *Medical Condition* occurred stating the reason why travel was impossible, the diagnosis and all dates of *Treatment*.
- c) Copy of death certificate indicating cause of death, if cancellation or interruption is due to death.
- d) Written evidence of the insured risk which was the cause of cancellation or interruption, if cancellation or interruption is due to any reason other than *Sickness, Serious Illness or Injury* or death.
- e) Original unused transport tickets, an electronic copy of the reservation *You* have made with the travel supplier, and any other itemized copy of any reimbursement *You* have asked for, including a written confirmation of the applicable penalties and reimbursements made or credit offered by the applicable travel supplier.

Baggage and Personal Effects

Immediately upon *Your* return to *Your Departure Point*, *You* must provide the *Insurer's* claims department with all the documents they need to deal with *Your* claim, including a police report, a property irregularity report, receipts for the items being claimed as applicable.

Claims evidence may include:

- Proof of travel (confirmation invoice, travel tickets)
- Loss or theft of property– police report
- Loss, theft or damage by an airline – property irregularity, baggage check tags
- Proof of value and ownership for property
- Receipts for emergency purchases

We may require other evidence to support *Your* claim depending on the circumstances, in which case We will contact *You*.

If *You* are unable to provide any of the reports referred to above, *You* may still be eligible to make a claim depending on the circumstances that have prevented *You* from obtaining the necessary documentation. Please contact the *Insurer's* claims department to discuss why *You* have been unable to obtain the relevant reports and to obtain a claim form so *Your* claim can be considered.

All claim forms are available online at www.humaniatravelinsurance.ca or by calling 1-833-268-0550.

If *You* wish to file a complaint to the *Insurer*, please read the procedure and our Complaint Review policy under "Make a complaint" at the bottom of www.humaniatravelinsurance.ca.

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The Insurers Act gives you important rights.

- The Act allows you to rescind an insurance contract, **without penalty**, within 10 days of the date on which it is signed. However, the insurer may grant you a longer period.
- To rescind the contract, you must give the insurer notice, within that time, by registered mail or any other means that allows you to obtain an acknowledgement of receipt.
- Despite the rescission of the insurance contract, the first contract entered into will remain in force. Caution, it is possible that you may lose advantageous conditions as a result of this insurance contract; contact your distributor or consult your contract.
- After the expiry of the applicable time, you may rescind the insurance contract at any time; however, penalties may apply.

For further information, contact the Autorité des marchés financiers at 1-877-525-0337 or visit www.lautorite.qc.ca/en.

Notice of rescission of an insurance contract

To: Humania Travel Insurance
247 Thibeau Boulevard, Trois-Rivières, QC, G8T 6X9

Date: _____
(date of sending of notice)

Pursuant to section 64 of the Insurers Act, I hereby cancel the insurance contract:

No: _____
(number of contract, if indicated)

Entered into on: _____
(date of signature of contract)

In: _____
(place of signature of contract)

_____ (name of client)

_____ (signature of client)