## **Insurance**

It is essential that you take out adequate insurance when you travel to the UK to study. Our insurance provider, Endsleigh, offers invaluable cover for international students studying in the UK for up to a maximum of 12 months.

Please complete the form on the reverse of this sheet and send with the Application form.

Cover includes reimbursement of your prepaid course fees due to cancelling, cutting short or repeating your course due to accident, illness or sickness; the cost of bringing a relative to the UK to visit you following a medical emergency; medical costs which are not covered by the National Health Service if you are taken ill or have an accident, and we will cover your legal liability to pay damages if you accidentally injure someone, or damage their property.

### 1. Select cover required

#### a. Please tick the period of cover you require:

Period	Premium (GB£)	Please tick ✓
→ 1 - 8 days	12.37	
→ 9 - 16 days	14.85	
→ 17 - 24 days	22.27	
→ 25 - 31 days	24.75	
→ 32 - 42 days	30.94	
→ 43 - 65 days	37.12	
→ 66 - 70 days	47.02	
→ 71 - 92 days	55.69	
→ 93 - 123 days	68.07	
→ 124 - 153 days	84.15	
→ 154 - 183 days	96.52	
→ 184 - 366 days	163.13	
→ I will provide my own cover*	N/A	

<sup>\*</sup> See Terms & Conditions

NB: All premiums shown are inclusive of Insurance Premium Tax at the current rate

Cover for over 90 sports and activities is included as standard under this policy and full details are available within your policy document.

### **Principal exclusions**

## General

- The first £50 of each and every claim per incident claimed for by each insured person except for claims under personal liability, personal accident and legal expenses where no excess applies.
- This policy is not available to anyone aged 66 or over.

### Cancellation or curtailment charges & course fees

 Any circumstances known prior to booking the trip that could reasonably be expected to give rise to a claim.

## Emergency medical and other expenses

 Treatment or surgery which in the opinion of the medical practitioner in attendance can wait until your return home.

#### b. Check what you are covered for:

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Cover	Up to 6 months (GB£)	6 - 12 months (GB£)	
→ Cancellation or Curtailment Charges	3,000	3,000	
→ Emergency Medical & Other Expenses			
Emergency Medical Expenses	2,000,000	2,000,000	
Emergency Dental Treatment	250	500	
Funeral Costs Abroad	3,000	5,000	
→ Personal Accident (Subject to Age)	30,000	30,000	
→ Baggage			
Baggage	1,000	1,000*	
Single Article Limit	200	200*	
Valuables Total Limit	250	300*	
→ Personal Money, Passport & Documents			
Cash Limit	100	100*	
Other Money & Documents Limit	500	100*	
Passport	100	500*	
→ Personal Liability	1,000,000	1,000,000	
→ Missed Departure	250	250	
→ Overseas Legal Expenses & Assistance	10,000	10,000	
→ Course Fees	5,000	8,000	

\* Cover is only applicable during: direct trips to and from your home country at the beginning and end of each academic term, outside the UK if the trip is required as part of your study course or for leisure trips within Europe for a period not exceeding 21 days in total in each period of insurance.

• Medication, which prior to departure is known to be required.

## ${\bf Baggage\,\&\,personal\,money, passport\,and\,documents}$

- Valuables left unattended at any time unless in a safety deposit box or in your locked accommodation.
- Baggage contained in an unattended motor vehicle between
  - 9 p.m. and 9 a.m. or;
- $-\,9\,a.m.$  and  $9\,p.m.$  unless it is in a locked boot or covered from view in a locked car.
- Personal money or your passport left unattended at any time unless in a hotel safe, safety deposit box or in your locked accommodation.

### 2. Important information

This policy is provided by AXA Travel Insurance Ltd and underwritten by Inter Partner Assistance IFSRA registration number NL161 with its registered address at 10-11 Mary Street, Dublin 1, Ireland. Inter Partner Assistance is a branch of the Inter Partner Assistance S.A. Avenue Louise 166 btel, 1050 Brussels, a Belgian company authorised by the Banking, Finance and Insurance Commission of Belgium, registration 0487. All companies are members of the Global AXA group. Kings School of English (Kings Colleges) is an appointed representative of Endsleigh Insurance Services Limited, which is authorised and regulated by the Financial Services Authority and can be checked by visiting their website at www.fsa.gov.uk.

Your travel insurance policy is governed by English law. English law will also apply prior to the conclusion of your contract of insurance.

### Complaints Procedure

We aim to provide a high level of service and pay claims fairly and promptly under the terms of your Travel Insurance Policy. If you are unhappy with any aspect of our service, please contact, in the first instance the person who originally dealt with your enquiry. Alternatively you can contact us by:

## **Telephone**: 0800 085 8698

**Post**: Customer Liaison Department, Endsleigh Insurance Services Limited, Shurdington Road, Cheltenham, Gloucestershire GL514UE Youmay at any time contact the Quality Manager at AXA Travel Insurance, POBOX 57325, London, EIW1XX If you remain dissatisfied you have the right to ask the Financial Ombudsman to review your case. The Ombudsman can be contacted at the following address: The Financial Ombudsman Service, South Quay Plaza, 183 Marsh Wall, London E14 9SR Contacting the Ombudsman will not affect your right to take legal action against us.

### What if I change my mind?

You can cancel your policy at any time. We will refund your premium less a charge for the time you have been insured, provided you have not travelled or your policy has not been terminated following a claim, in which case no refund will be due. A £20 cancellation fee will be deducted from any refund due.

### 3. Declaration

#### **Travel Eligibility Statements**

You and anyone named on the policy are:

An international student (or their immediate family) studying for a degree or other recognised qualification at a College or University in the United Kingdom or studying a language course at an Accredited Language School in the United Kingdom.

I have read and accepted these statements to confirm eligibility

### **Important Conditions Relating to Health**

To proceed you must be able to agree to the following important conditions relating to health on behalf of you and anyone else to be insured on this policy. You must comply with the following conditions to have the full protection of your policy. It is a condition of this policy that you will not be covered for any claims arising directly or indirectly from:

A. At the time of taking out this policy:

- 1. Any medical condition you or anyone named on the policy have or have had for which:
  - a. symptoms or diagnosis has occurred within the last 12 months or
  - b. there has been a change in treatment (including medication, dosage, surgery, tests, investigations or diet) in the last 12 months.
- 2. Any medical condition where you, anyone named on the policy, a close relative or a close business associate:
  - a. are waiting for an operation, hospital consultation (other than for regular check ups), or other hospital treatment or investigation.
  - b. have, within the last 6 months, been seen by a specialist (other than for regular check ups), had an operation or other hospital treatment or investigation.
  - c. have received a terminal prognosis.
  - d. have not had a diagnosis.
- 3. Any circumstances you are aware of that could reasonably be expected to give rise to a claim on this policy.

#### B. At any time:

- 1. Any medical condition you or anyone named on the policy have in respect of which you are travelling against medical advice or for which you are travelling to obtain medical treatment abroad.
- 2. Any medical condition for which you or anyone named on the policy are not taking the recommended treatment or prescribed medication as directed by a medical practitioner.
- 3. Travel against any health requirements stipulated by the carrier, their handling agents or other Public Transport provider.

I have read and agreed to these important conditions relating to health

You must give full and true answers to all questions. If you do not do so, your insurance cover may not protect you in the event of a claim. I declare that to the best of my knowledge all the information provided in connection with this proposal is correct and complete. I agree that this proposal is for insurance in the normal terms and conditions of the insurer's policy and shall be incorporated in and form the basis of the contract.

Signature	П	Date d d / m m / y y

### The Endsleigh Group of Companies ("Endsleigh, We, Us") Privacy Policy

It is Endsleigh's policy to take all necessary steps to ensure that your personal data held is processed fairly and lawfully in accordance with the Data Protection Act 1998 ("the Act"). We hold personal data relating to you in connection with insurance products and services you have asked Us to provide. Except to the extent We are required or permitted by law, personal data provided to or obtained by Us will be used for the purposes of providing you with the products and services you have requested. It may also be shared within other Endsleigh group companies, (full details of which are available on request), as well as carefully selected third parties who have products and services that We think may be of interest to you. In the process of gathering your details We may collect sensitive information such as about your health or in relation to motoring offences. If you purchase products or services from Us, you will have given Us your consent to use this personal data as detailed in this Privacy Policy. We may wish to contact you from time to time by telephone, e-mail or post about other products and services that may be of interest to you. If at any time you do not wish to receive this information then please write to Endsleigh's Group Data Protection Officer at: Endsleigh Insurance Services Limited, Shurdington Road, Cheltenham, Gloucestershire GL51 4UE. Under the Act, as a data subject, you are granted certain rights. If you would like to know what information We hold about you you can write to Us as above. We may charge you a statutory administration fee to comply with your request. Should you have any other queries in connection with data protection then please contact Endsleigh's Group Data Protection Officer as above. Endsleigh will share the personal details you provide with Inter Partner Assistance S.A., Avenue Louise 166 btel, 1050 Brussels, a member of the AXA Group. To administer your policy AXA will hold and use information about you supplied by you (and by medical providers). AXA may send it in con

4. Complete your application					
Title:	First name:	Surname:			
Date of birth: d d / m i	п/уу				
Period of cover: from dd/mm/yy to dd/mm/yy		Premium: £			

The fees for your insurance will be added to the invoice for your course.

# 5. What next?

 $Your \, details \, will \, be \, processed \, and \, your \, policy \, documentation \, sent \, to \, you \, within \, the \, next \, week. \, details \, will be \, processed \, and \, your \, policy \, documentation \, sent \, to \, you \, within \, the \, next \, week. \, details \, will be \, processed \, and \, your \, policy \, documentation \, sent \, to \, you \, within \, the \, next \, week. \, details \, will be \, processed \, and \, your \, policy \, documentation \, sent \, to \, you \, within \, the \, next \, week. \, details \, will be \, processed \, and \, your \, policy \, documentation \, sent \, to \, you \, within \, the \, next \, week. \, details \, will be \, processed \, and \, your \, policy \, documentation \, sent \, to \, you \, within \, the \, next \, week. \, details \, will be \, processed \, and \, your \, policy \, documentation \, sent \, to \, you \, within \, the \, next \, week. \, details \, will be \, processed \, and \, your \, policy \, documentation \, sent \, to \, you \, within \, the \, next \, week. \, details \, will be \, processed \, and \, your \, policy \, documentation \, sent \, you \, within \, the \, next \, week. \, details \, will be \, processed \, and \, your \, policy \, documentation \, details \, will be \, processed \, and \, your \, policy \, documentation \, details \, will be \, processed \, and \, your \, policy \, documentation \, details \, will be \, processed \, and \, your \, policy \, documentation \, details \, details$ 

Please mail or fax this completed form to your chosen college location. Details are printed on the back of the main document or visit www.kingscolleges.com