DESCRIPTION OF COVERAGE

Travel Guard’s MVCI Owner Travel Insurance Plan

Schedule of Benefits

<table>
<thead>
<tr>
<th>Maximum Benefit Limit</th>
<th>Trip Cancellation &amp; Interruption</th>
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<tbody>
<tr>
<td>1-12 days per year up to $2,000</td>
<td>$1,750 Travel Delay ($200 maximum per day)</td>
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<tr>
<td></td>
<td>$1,000 Baggage &amp; Personal Effects</td>
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<td></td>
<td>$500 Baggage Delay ($100 maximum per day)</td>
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<td></td>
<td>$1,000 Medical Expense</td>
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<td></td>
<td>$50,000 Emergency Medical Transportation</td>
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<td>$10,000 Accidental Death &amp; Dismemberment</td>
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<tr>
<th>Services</th>
<th>Included</th>
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<tbody>
<tr>
<td></td>
<td>TRAVEL GUARD® Assist</td>
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<tr>
<td></td>
<td>LiveTravel</td>
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<tr>
<td></td>
<td>Emergency Cash Transfer Assistance</td>
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<td></td>
<td>Roadside Assistance</td>
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</tbody>
</table>

Blanket Travel Accident Insurance

This document describes the benefits and basic provisions of the policy. The Insured should read it with care so he/she will understand the coverage. The policy is the only contract under which benefits are paid.

PLEASE READ THIS DOCUMENT CAREFULLY!

Insurance Coverage

Underwritten by the American Home Assurance Company, a New York insurance company, with its principal place of business at 70 Pine Street, New York, New York 10270. It is currently authorized to transact business in all states and the District of Columbia. NAIC No. 19380.

This is only a brief description of the insurance coverage(s) available under policy series Travel Guard Program Policies (TGP policies). The Policy contains reductions, limitations, exclusions, and termination provisions. Full details of the coverage are contained in the Policy. If there are any conflicts between this document and the Policy, the Policy shall govern.

- COVERAGE IS VALID ONLY IF PREMIUM HAS BEEN PAID -

PRODUCT NUMBER: 008017-CT P1 2/06

In the event of a claim, please refer to the above Product Number.

Definitions

“Baggage” means luggage and personal possessions, whether owned, borrowed, or rented, taken by the Insured on the Trip.

“Business Partner” means an individual who a) is involved with the Insured or the Insured’s Traveling Companion in a legal partnership; and b) is actively involved in the daily management of the business.

“Common Carrier” means any conveyance operated under a license for the transportation of passengers for hire.

“Complication of Pregnancy” means a condition in which the diagnosis is distinct from pregnancy but adversely affected or caused by pregnancy. It does not include any condition associated with the management of a difficult pregnancy not consisting of a classifiably distinct Complication of Pregnancy.

“Injury” means a bodily Injury caused by an accident occurring while this Policy is in force as to the Insured whose Injury is the basis of a claim, and resulting directly and independently of all other causes of loss covered by this Policy. The Injury must be verified by a Physician.

“No Insured” means an individual who has ownership of a Marriott Vacation Club International timeshare interest and has elected coverage under the policy.

“Insurer” means National Union Fire Insurance Company of Pittsburgh, PA.

“Medically Necessary” means that a treatment, service or supply: (1) is essential for diagnosis, treatment, or care of the Injury or Sickness for which it is prescribed or performed; (2) meets generally accepted standards of medical practice; (3) is ordered by a Physician and performed under his/hers care, supervision, or order; and (4) is primarily for the convenience of the Insured, Physician, other providers, or any other person.

“Natural Disaster” means a flood, hurricane, tornado, earthquake, or blizzard that is due to natural causes.

“Physician” means a licensed practitioner of the healing arts, acting within the scope of his/her license. The treating Physician may not be the Insured, Immediate Family Member of the Insured or the Insured’s spouse or a Traveling Companion.

“Experimental or Investigative” means treatment, a device or prescription medication which is recommended by a Physician, but is not considered by the medical community as a whole to be safe and effective for the condition for which the treatment, device or prescription medication is being used, including any treatment, procedure, facility, equipment, drugs, drug usage, devices, or supplies not recognized as accepted medical practice, and any of those items required federal or other governmental agency approval not received at the time services are rendered.

“Inhospital” means a place that: (a) holds a valid license; (b) is run mainly for the care and treatment of sick or injured persons as inpatients; (c) has a staff of one or more Physicians available at all times; (d) provides 24-hour nursing service and has at least one registered nurse on duty at all times; (e) has organized diagnostic and surgical facili-
“Sickness” means an illness or disease which requires treatment by a Physician.

“Strike” means a stoppage of work (a) announced, organized, and sanctioned by a labor union and (b) which interferes with the normal departure and arrival of a Common Carrier. Included in the definition of Strike are work slowdowns and sickouts.

“Travel Arranger” means the travel agent or travel agency that is responsible for arranging the pre-paid travel arrangements for the Insured’s Trip.

“Traveling Companion” means a person or persons with whom the Insured has coordinated travel arrangements and intends to travel with during the Trip. A group or tour leader is not considered a Traveling Companion, unless the Insured is sharing room accommodations with the group or tour leader.

“Trip” means a defined period of round-Trip travel away from home to a Destination outside the Insured’s city of residence in each calendar year; the Trip has defined departure and return dates; the Trip does not exceed 31 days total; travel is primarily by Common Carrier and only incidentally by private conveyance.

Individual Eligibility, Effective & Termination Dates

Eligibility: Persons eligible for insurance under the policy are any individuals who are residents in the US, Puerto Rico, or Canada and have ownership interest in a Marriott Vacation Club International resort.

Effective Date: Insurance will become effective at 12:01 a.m. on the day after the premium has been paid. Trip Cancellation coverage, will be effective the later of (a) 12:01 a.m. on the day after premium is paid, or (b) the date that a Trip is booked. All other coverage described under the plan selected will begin on the later of: (a) the date and time the Insured starts a Trip; or (b) the Contracted Departure Date provided the Trip is within the insurance coverage period.

Termination Date: An Insured’s Trip cancellation coverage terminates on the earlier of: (a) the date a Trip is cancelled or (b) the Contracted Departure Date. All other coverages will terminate on the later of: (a) the date a Trip is completely canceled; (b) the Insured’s Return Date for a Trip; (c) the Insured’s arrival at the Return Destination on a round-Trip, (d) the date a Trip is cancelled; or (e) the end of the coverage period. The insurance terminates at the end of the coverage period, which is the end of the calendar year in which the Insured is entitled to stay at the Destination.

General Exclusions

These exclusions apply to all benefits. In addition to any exclusions which apply to a particular benefit (called “Additional Exclusions”), the policy does not cover loss caused by: (a) suicide, or attempted suicide, or intentionally self-inflicted Injury or any attempt at intentionally self-inflicted Injury by the Insured, Immediate Family Member, Traveling Companion or Business Partner (while sane, in Colorado and Missouri); (b) pregnancy or childbirth, or elective abortion, other than Complications of Pregnancy; (c) professional athletic events, motor sport, or motor racing, including training or practice for the same; (d) mountain climbing; (e) war or act of war, whether declared or not, civil commotion, insurrection or riot; (f) full-time active duty in the armed forces, National Guard or organized reserve corps of any country or international authority. (Unearned premium for any period for which the Insured is not covered due to his or her active duty status will be refunded.) (Loss caused while on short-term National Guard or reserve duty for regularly scheduled training purposes is not excluded).

MAXIMUM LIMIT OF LIABILITY: All limits are applied per Trip. The Insurer’s maximum limit of liability resulting from the same occurrence will be $10,000,000 under the Travel Guard Policies underwritten by National Union. If loss for all Insureds from such an occurrence exceeds $10,000,000, the Insurer will pay each Insured that proportion of the Benefits stated which $10,000,000 bears to the total loss of all persons the Insurer insures under all travel and flight insurance in force, under the Travel Guard Policies underwritten by National Union. The Insurer will pay no more than $250,000 per occurrence, under the Travel Guard Policies underwritten by National Union, to or on account of any person insured under the Travel Guard Policies underwritten by National Union.

Trip Cancellation and Interruption

The Insurer will pay this benefit up to the Maximum Limit shown on the Schedule of Benefits if a Trip is canceled or interrupted due to any of the following unforeseen reasons: (a) Sickness, Injury, or death of an Insured, Immediate Family Member, Traveling Companion, or Business Partner, Injury or Sickness must be so disabling as to reasonably cause a Trip to be delayed, canceled, or interrupted; (b) Inclement Weather conditions causing delay or cancellation of travel; (c) the Insured’s principal residence being made uninhabitable by fire, flood, or similar Natural Disaster, vandalism, or burglary; (d) the Insured being subpoenaed, required to serve on jury duty, hijacked, or quarantined; (e) being involved in or delayed due to an automobile accident en route to departure; (f) Strike, resulting in the complete cessation of travel services at the point of departure or Destination. This coverage does not cover loss caused by: (i) carrier-caused delays including an announced, organized, sanctioned labor union Strike that affects public transportation, unless the Insured’s coverage effective date is prior to the time the Strike is foreseeable. A Strike is foreseeable on the date labor union members vote to approve a Strike; (ii) travel arrangements canceled or changed by an airline, cruise line, or tour operator, unless the cancellation is the result of a covered reason; (iii) changes in plans by the Insured, an Immediate Family Member, or Traveling Companion, for any reason; (iv) financial circumstances of the Insured, an Immediate Family Member, or a Traveling Companion; (v) any business or contractual obligations of the Insured, an Immediate Family Member, or a Traveling Companion; (vi) Default by the person, agency, or tour operator from whom the Insured bought his/her coverage or purchased airline travel arrangements; (vii) any government regulation or prohibition; (viii) an event or circumstance which occurs prior to the Insured’s coverage effective date.

Trip Cancellation Benefits: The Insurer will pay this benefit up to the Maximum Limit shown on the Schedule of Benefits for Trips that are delayed or canceled before the scheduled Contracted Departure Date. If the Insured’s trip is cancelled due to the reasons shown at the beginning of this section, the Insurer will reimburse for non-refundable, unused prepaid payments or deposits made to the Travel Arranger, including exchange fees, airline ticket change fees, and the annual maintenance fee associated with the...
cancelled timeshare use period. The Insurer will pro-rate any maintenance fee reimbursement in the event that the duration of the Insured’s Trip is less than the full timeshare period.

The Insurer will pay the Insured’s additional cost as a result of a change in the per-person occupancy rate for prepaid travel arrangements if a Traveling Companion’s Trip is canceled due to reasons shown at the beginning of this section, and the Insured’s Trip is not canceled.

**Trip Interruption Benefits:** The Insurer will pay this benefit up to the Maximum Limit shown on the Schedule of Benefits for Trips that have been interrupted or delayed, due to the reasons shown at the beginning of this section. The Insurer will pay for the following: (a) unused prepaid payments or deposits for the Insured’s Trip if the Insured’s Trip is interrupted; or (b) additional transportation expenses incurred by the Insured, either (i) to the Return Destination; or (ii) from the place that the Insured left the Trip to the place that the Insured may rejoin the Trip; (c) additional transportation expenses incurred by the Insured to reach the original Trip Destination if the Insured is delayed, and leaves after the Contracted Departure Date. The benefit payable under (b) and (c) above will not exceed the cost of economy airfare (or first class if the Insured’s original tickets were first class) by the most direct route, less any refunds paid or payable; (d) the Insured’s additional cost as a result of a change in the per-person occupancy rate for prepaid travel arrangements if a Traveling Companion’s Trip is interrupted, and the Insured’s Trip is continued.

**Travel Delay**

The Insurer will reimburse up to $200 a day to the Maximum Limit shown on the Schedule of Benefits if the Insured’s Trip is delayed for 12 or more hours for Reasonable Additional Expenses until travel becomes possible. Incurred expenses must be accompanied by receipts. This benefit is payable for only one delay per Insured, per Trip. Travel Delay must be caused by: (a) carrier delay; or (b) lost or stolen passport, travel documents, or money; or (c) quarantine; or (d) cancellation of a Common Carrier caused by Inclement Weather; or (e) Injury or Sickness of the Insured or Traveling Companion.

**Loss of Baggage and Personal Effects**

The Insurer will reimburse up to the Maximum Limit shown on the Schedule of Benefits for baggage that is delayed or misdirected more than 24 hours for the cost of necessary personal effects. Incurred expenses must be accompanied by receipts. This does not apply if Baggage is delayed after the Insured reaches his/her Return Destination.

**Medical Expense Benefit**

The Insurer will pay this benefit, up to the Maximum Limit shown on the Schedule of Benefits. The Insurer will pay for medical expenses incurred by the Insured within one year from the date of Injury or Sickness provided initial treatment was received during the Trip. The Injury must occur or Sickness must begin while the Insured is covered by the policy.

**Emergency Medical Transportation**

The Insurer will pay this benefit up to the Maximum Limit shown on the Schedule of Benefits. Travel Guard Assist will arrange for emergency medical transportation services required by the Insured as the result of an Injury or emergency Sickness during a Trip.

**Covered Expenses:** The Insurer will pay: (a) Reasonable and Customary Charges for medical services required for evacuation to the nearest adequate medical facility or home if medically required. This service will be arranged only if the Insured’s Physician determines that adequate medical treatment is not locally available; (b) up to $5,000 for reasonable and necessary charges for escort expenses required by Insured, if the Insured is disabled during a Trip, and an escort is recommended, in writing, by the attending Physician; (c) reasonable and necessary charges for services for transportation of the Insured’s remains to his/her city of burial if he/she dies during a Trip. Services must be provided by a provider designated by Travel Guard Assist.

**Additional Benefit:** In addition to the above Covered Expenses, if the Insurer has previously evacuated an Insured to a medical facility, the Insurer will pay the Insured’s airfare costs from that facility to the Insured’s Return Destination, within one year from the Insured’s original Contracted Return Date, less refunds from the Insured’s unused transportation tickets. Airfare costs will be economy, or first class if the Insured’s original tickets are first class. This benefit is available only if it is not provided under another coverage in the policy.

**Additional Exclusions:** In addition to the General Exclusions, coverage is not provided for: (a) routine physical examinations; (b) replacement of hearing aids, eye glasses, contact lenses, sunglasses, and artificial teeth; (c) routine dental care; (d) any service provided by the Insured, an Immediate Family Member or Traveling Companion.

**Payment of Loss:** The Insurer must provide the Insurer with: (a) all medical bills and reports for medical expenses claimed; and (b) a signed patient authorization to release medical information to the Insurer.

The Insurer will pay each benefit up to the Maximum Limit shown on the Schedule of Benefits. The Insurer will pay for treatment or expenses incurred after the Insured has reached his or her Destination, in the case of a one-way ticket, or Return Destination regardless of the reason. The treatment must be given by a Physician or dentist. The Insurer will pay for professional nursing, Hospital charges, X-ray, ambulance services, and prosthetic devices. If the Insured is covered by any other group, blanket health, accident insurance, or assistance plan, and would, as a result, receive total benefits in excess of the expenses actually incurred, the benefits will be reduced by such excess.

**Payment of Loss:** The Insurer will pay each benefit up to the Maximum Limit shown on the Schedule of Benefits. The Insurer will pay for treatment or expenses incurred after the Insured has reached his or her Destination, in the case of a one-way ticket, or Return Destination regardless of the reason. The treatment must be given by a Physician or dentist. The Insurer will pay for professional nursing, Hospital charges, X-ray, ambulance services, and prosthetic devices. If the Insured is covered by any other group, blanket health, accident insurance, or assistance plan, and would, as a result, receive total benefits in excess of the expenses actually incurred, the benefits will be reduced by such excess.

**Medical Expense Benefit**

The Insurer will pay this benefit, up to the Maximum Limit shown on the Schedule of Benefits. The Insurer will pay for medical expenses incurred by the Insured within one year from the date of Injury or Sickness provided initial treatment was received during the Trip. The Injury must occur or Sickness must begin while the Insured is covered by the policy.

**Covered Expenses:** The Insurer will pay the Insured’s Reasonable and Customary Charges for medical and surgical expenses. The Insurer will pay emergency dental treatment only during a Trip. Dental coverage does not apply if treatment or expenses are incurred after the Insured has reached his or her Destination, in the case of a one-way ticket, or Return Destination regardless of the reason. The treatment must be given by a Physician or dentist. The Insurer will pay for professional nursing, Hospital charges, X-ray, ambulance services, and prosthetic devices. If the Insured is covered by any other group, blanket health, accident insurance, or assistance plan, and would, as a result, receive total benefits in excess of the expenses actually incurred, the benefits will be reduced by such excess.
by the Insured to the Insurer’s designated provider is required, with regard to Emergency Evacuation.

**Accidental Death and Dismemberment**

The Insurer will pay this benefit up to the Maximum Limit shown on the Schedule of Benefits if: (a) the Insured is Injured in an accident which happens while he or she is on a Trip and covered under the Policy; and (b) he or she suffers one of the losses listed below, within 180 days of the accident.

The Maximum Limit is shown on the Schedule of Benefits.

<table>
<thead>
<tr>
<th>Percentage of Maximum Limit Payable</th>
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<tbody>
<tr>
<td>Life</td>
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<tr>
<td>Both hands or feet, or sight of both eyes</td>
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<tr>
<td>One hand and one foot</td>
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<tr>
<td>One hand or one foot and sight of one eye</td>
</tr>
<tr>
<td>Speech and Hearing in Both Ears</td>
</tr>
<tr>
<td>One hand</td>
</tr>
<tr>
<td>One foot</td>
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<tr>
<td>Sight of One Eye</td>
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If the Insured suffers more than one loss from an accident, the Insurer will pay only for the loss with the larger benefit. The Insurer will not pay more than 100% of the Maximum Limit for all losses due to the same accident.

Loss of a hand or feet means complete severance at or above the wrist or ankle joint. Loss of sight of an eye means complete and irreversible loss of sight. Speech or hearing means entire and irreversible loss of speech or hearing in both ears.

**Disappearance:** If the Insured’s body is not found within one year of the disappearance, forced landing, stranding, wrecking, or sinking of a conveyance in which he/she was an occupant, he/she will be presumed dead.

**Additional Exclusion:** In addition to the General Exclusions, the Insurer will not pay for loss caused by or resulting from Sickness or disease of any kind.

**Payment of Claims**

**Claim Procedures: Notice of Claim:** The Insured must call Travel Guard as soon as reasonably possible, and be prepared with what coverage the loss was under (i.e., Loss of Life or Dismemberment). Notice of Claim procedures are shown for California residents. All claims are subject to the General Provisions.

**Payment of Claims: When Paid:** Claims will be paid as soon as Travel Guard receives complete proof of loss and verification of age.

**Payment of Claims: To Whom Paid:** Benefits paid on account of an Insured’s death will be paid to: 1) his/her spouse, if living; 2) if not, in equal shares to his/her living children; 3) if there are none, in equal shares to his/her living parents; 4) if there are none, in equal shares to his/her living brothers and sisters; 5) if there are none, to his/her estate.

If a benefit is payable to the Insured’s estate, or to a minor or other person who is incapable of giving a valid release, the Insurer may pay up to $1,000 to a relative by blood or connection by marriage who has assumed care or custody of the minor or responsibility for the incompetent person’s affairs. Any payment the Insurer makes in good faith fully discharges the Insurer to the extent of that payment. All other benefits will be payable to the Insured.

Benefits for Medical Expense/Emergency Medical Transportation Services may be payable directly to the provider of the services. However, the provider: a) must comply with the statutory provision for direct payment, and b) must not have been paid from any other sources.

**Problems with your insurance?** If so, do not hesitate to contact Travel Guard at 1145 Clark Street, Stevens Point, WI 54481, or call 1-866-385-4840. Problems with your insurance? If so, do not hesitate to contact Travel Guard at 1145 Clark Street, Stevens Point, WI 54481, or call 1-866-385-4840.

**General Provisions**

**Acts of Agents** – No agent or any person or entity has authority to act on behalf of the Insurer or to modify any of the provisions of the policy.

**Autopsy** – The Insurer at its own expense, may require an autopsy where permitted by law.

**Concealment or Fraud** – The Insurer does not provide coverage for the Insured if the Insured has intentionally concealed or misrepresented any material fact or circumstance relating to the policy or claim.

**Insurer’s Recovery Rights** – In the event of a payment under the policy, the Insurer is entitled to all rights of recovery that the Insured, or the person to whom payment was made, has against another. The Insurer must sign and deliver to the Insurer any legal papers relating to that recovery, do whatever is necessary to help the Insurer exercise those rights, and do nothing after the loss to harm the Insurer’s rights. When an Insured has been paid benefits under the policy but also recovers from another policy, the amount recovered from the other policy shall be held in trust for the Insurer by the Insured and reimbursed to the Insurer the extent of the Insurer’s payment. The provision does not apply in North Carolina.

**Legal Actions** – No one may sue for benefits less than 60 days after due proof of loss is submitted, nor more than 3 years (or the minimum period of time permitted by state law, if greater) after the date claim forms are due.

**Payment of Premium** – Coverage is not effective unless all premium due has been paid to Travel Guard prior to a date of loss or insured occurrence.

**Termination of the Policy** – Termination of the policy will not affect a claim for loss which occurs while the policy is in force.

**Transfer of Coverage** – Coverage under the policy cannot be transferred by the Insured to anyone else.

**Notice to California residents:** The plan contains disability insurance benefits or health insurance benefits, or both, that only apply during your covered Trip. You may have coverage from other sources that already provides you with these benefits. You should review your existing policies. If you have any questions about your current coverage, call your insurer or health plan.

**Notice to Florida residents:** The benefits of the Policy providing your coverage are governed primarily by the law of a state other than Florida.

Notice: Your homeowners policy, if any, may provide coverage for loss of personal effects provided by any Baggage/Personal Effects coverage provided by this policy. This insurance is not required in connection with the Insured’s purchase of travel tickets.

The definition of “Hospital” applicable to residents of Florida is as follows:

Hospital means a facility that: (1) is operated according to law for the care and treatment of injured people; (2) has organized facilities for diagnosis and surgery on its premises or in facilities available to it on a prearranged basis or is accredited by the Joint Commission on the Accreditation of Hospitals, the American Osteopathic Association, or the Commission on Accreditation of Rehabilitation Facilities; (3) has 24 hour nursing service by registered nurses (R.N.’s); and (4) is supervised by one or more Physicians. A Hospital does not include: (1) a nursing, convalescent or geriatric unit of a hospital when a patient is confined mainly to receive nursing care; (2) a facility that is, other than incidentally, a rest home, nursing home, con-
Travel Guard® Assist

All benefits provided are non-insurance services, not insurance benefits. Any costs associated with benefits not purchased will be paid by the named Insured.

24-Hour Medical Assistance

24-Hour Medical Monitoring: Physicians monitor the Insured’s condition by maintaining close contact with the attending Physicians, his/her family Physician, and Immediate Family Members.

Medical Evacuation: Arrangements for any and all means necessary to transport the Insured back home when Medically Necessary.

Emergency Medical Payments: If a Hospital demands a cash deposit or settlement prior to leaving, Travel Guard will assist in arranging the advancement of funds to cover on-site medical expenses.

Prescription Assistance: Replacement of lost or stolen medication, through a local pharmacy or special courier.

Transportation of Dependents: In the event of hospitalization, arrangements will be made for unattended minors traveling with the Insured to be flown home.

Family Visit: If the Insured is hospitalized for ten or more days, Travel Guard will arrange transportation for an Immediate Family Member or close friend to visit him/her.

Transportation of Mortal Remains: In the event of death while traveling, arrangements for the return of remains to the place of burial.

24-Hour Legal Assistance

In a legal emergency, referral to a local legal advisor, and advance of funds for bail and legal fees.

24-Hour Travel Assistance

Travel Documents Assistance: Travel Guard will help retrieve, report, and reissue lost or stolen travel documents.

Emergency Cash Transfer: Travel Guard will, whenever possible, coordinate with the Insured and a wire agency, in obtaining funds in local currency for medical or travel emergencies.

Emergency Message Center: Transmission of emergency messages to family and business associates.

Interpretation Services: Travel Guard provides emergency language support or referral to the appropriate local services.

24-hour Live Travel Assistance

Provides 24-hour assistance for emergency travel needs. Allows you to make emergency travel changes such as rebooking flights, making hotel reservations, tracking lost luggage, and replacing lost credit cards. Call 1.800.826.8597 for assistance.

Live Messaging

Relay of e-mail or phone message to family, friends, or business associates.

Emergency Cash Transfer

Assistance in coordinating an emergency cash advance.

Pre-Trip Travel Advice

Around-the-clock access to passport, visa, inoculation, and vaccine requirements; travel advisories; embassy and consulate contacts; travel health advisories; weather and currency information – all for the Insured’s planned Destination.

24-Hour Roadside Assistance Services**

Towing Assistance – When towing is necessary, the covered vehicle will be towed to the nearest service facility or to any location requested by the covered customer.

Flat Tire Assistance – Service consists of the replacement of a flat tire with the covered vehicle’s spare tire. Towing assistance will be provided if needed.

Oil, Fluid, and Water Delivery Service – An emergency supply of oil, fluid, and water will be delivered to any covered vehicle in immediate need. The customer must pay for costs of the fluids if there is one.

Fuel Delivery Service – An emergency supply of fuel will be delivered to any covered vehicle in immediate need. The customer must pay for the costs of the fluids if there is one.

Lock-out Assistance – Assistance will be provided in gaining entry to a covered vehicle if the keys are lost or locked inside.

Battery Assistance – Battery assistance (jump-start) will be provided to any covered customer in immediate need.

Collision Assistance – If a customer is involved in a collision in their covered vehicle, towing assistance will be provided when needed to direct the vehicle back to the issuing dealer if possible or to the nearest qualified repair facility.

*Non-insurance services through Travel Guard® Assist are provided by Travel Guard®.

**Roadside Assistance provided by Road America, 7300 Corporate Center Dr., 6th Floor, Miami, FL 33126.

Program fees are non-refundable.

Make sure you call Travel Guard (1.866.385.4840 or 1.715.295.5452) before you seek medical care while traveling. Where available, we can arrange direct payment to a member of our Preferred medical network, saving you the time and paperwork associated with reimbursement of medical expenses. Our assistance coordinators also can help you locate the nearest and most appropriate medical provider, monitor your care, and provide updates to your family and/or employer.