

Please read this carefully and keep it for future reference.

This outlines how specific sections of your Certificates of Insurance are being updated. You can find a copy of your updated Certificate of Insurance at td.com/agreements. For any questions about your insurance benefits, call 1-866-374-1129.

Updates to the inclusive insurance on the TD® Aeroplan® Visa Infinite Privilege* Card

TD has updated the certificates of Insurance in an effort to add clarity to the coverage and to clearly outline the eligibility requirements.

Note: There is no change to your existing coverage. No action required.

If you have any questions or concerns call us toll-free at 1-866-374-1129 Monday to Friday, 8:00 a.m. to 8:00 p.m. ET, and speak to one of our Customer Service Representatives.

CLHIA recommended changes to *Certificate of Insurance*

Changes to your Certificate of Insurance, as of March 24, 2022		
Benefit	Before	After
Travel Medical Insurance	Coverage under this <i>Certificate</i> is provided by: TD Life Insurance Company (Insurer) 320 Front Street West, 3rd Floor, Toronto, ON M5V 3B6	Coverage under this Certificate is provided by TD Life Insurance Company (“Insurer”) P.O. Box 1, TD Centre, Toronto, ON M5K 1A2
Travel Medical Insurance	Administration services are provided by: Allianz Global Assistance (<i>Administrator</i>) P.O. Box 277, Waterloo, ON N2J 4A4 Phone: 1-866-374-1129 or (416) 977-4425	Claims administration and adjudication services are provided by: Global Excel Management Inc. (“Administrator”) 73 Queen Street, Sherbrooke, QC J1M 0C9 Phone: 1-866-374-1129 or +1-416-977-4425
Travel Medical Insurance	This <i>Certificate</i> applies to the TD Aeroplan Visa Infinite Privilege Card which will be referred to as a “TD Credit Card” throughout the <i>Certificate</i> . TD Life Insurance Company (“TD Life”) provides the insurance for this <i>Certificate</i> under Group Policy No. TGV002 (the “Group Policy”). <i>Our Administrator</i> administers the insurance on behalf of TD Life, and provides medical and claims assistance, claims payment and administrative services under the Group Policy. This <i>Certificate</i> contains important information. Please read it carefully and take it with <i>You</i> on <i>Your</i> trip.	Section 2 – Introduction Certificate of Insurance This <i>Certificate</i> applies to the TD Aeroplan Visa Infinite Privilege Card, which will be referred to as a “TD Credit Card” throughout the <i>Certificate</i> . TD Life Insurance Company (“TD Life”) provides the insurance for this <i>Certificate</i> under Group Policy No. TGV002 (the “Group Policy”). <i>Our Administrator</i> administers the insurance on behalf of TD Life, and provides medical and claims assistance, claims payment and administrative services under the Group Policy. This <i>Certificate</i> contains important information. Please read it carefully and take it with <i>You</i> on <i>Your</i> trip. How to contact Us • Prior to travel, contact <i>Our Administrator</i> : Call 1-866-374-1129 (toll-free) from 8 a.m. to 8 p.m. ET, Monday to Friday. • When travelling and <i>You</i> require emergency health care or 24-Hour Emergency Assistance, contact <i>Our Administrator</i> : Call 1-866-374-1129 (toll-free) from Canada or the U.S., or +1-416-977-4425 (collect) from other countries. • In a <i>Medical Emergency</i> , <i>You</i> must call <i>Our Administrator</i> immediately, or as soon as reasonably possible. If not, benefits will be limited as described in Section 6 – “Limitations and Exclusions”, under “ <i>Medical Emergency Treatment</i> requires pre-approval of <i>Our Administrator</i> .” Some expenses will only be covered if <i>Our Administrator</i> approves them in advance.

Changes to your Certificate of Insurance, as of March 24, 2022

Benefit	Before	After
Travel Medical Insurance	<p>IMPORTANT NOTICE – PLEASE READ CAREFULLY</p> <ul style="list-style-type: none"> • Travel insurance is designed to cover losses arising from sudden and unforeseeable circumstances. It is important that <i>You</i> read and understand <i>Your Certificate</i> before <i>You</i> travel as <i>Your coverage</i> may be subject to certain limitations or exclusions. • <i>Your</i> policy may not provide coverage for Medical Conditions and/or symptoms that existed before <i>Your</i> trip. Check to see how this applies in <i>Your Certificate</i> and how it relates to <i>Your</i> Departure Date. Please see sections 6 and 7 of this <i>Certificate</i> for details. Should <i>You</i> have any questions or need further clarification, please contact <i>Our Administrator</i> at 1-866-374-1129 or at (416) 977-4425. • In the event of an accident, injury or sickness, <i>Your</i> prior medical history may be reviewed when a claim is made. If a <i>Medical Emergency</i> occurs, <i>You</i>, or if applicable, an Insured Person, must phone <i>Our Administrator</i> immediately, or as soon as is reasonably possible, or the Maximum Benefit Payable will be reduced to \$30,000, and only 80% of the Eligible <i>Medical Emergency</i> Expenses will be covered. <i>You</i> can call <i>Our Administrator</i> 24 hours a day, seven days a <i>Week</i> at 1-866-374-1129 from Canada or the <i>USA</i>, or from other countries by calling collect at (416) 977-4425. Please see section 8 for further details 	<p>IMPORTANT NOTICE – READ CAREFULLY BEFORE YOU TRAVEL</p> <p><i>We</i> want <i>You</i> to understand (and it is in <i>Your</i> best interest to know) what <i>Your</i> coverage includes, what it excludes, and what is limited (payable but with limits). Please take time to read through <i>Your Certificate</i> before <i>You</i> travel. Italicized and capitalized terms are defined in <i>Your Certificate</i>.</p> <ul style="list-style-type: none"> • Travel insurance covers claims arising from sudden and unexpected situations (e.g., accidents and emergencies). • To qualify for this insurance, <i>You</i> must meet all the eligibility requirements. • This insurance contains limitations and exclusions (e.g., <i>Medical Conditions</i> that are not <i>Stable</i>, pregnancy, child born on trip, excessive use of alcohol, high-risk activities, etc.). • This insurance may not cover claims related to <i>Pre-Existing Medical Conditions</i> whether disclosed or not. <ul style="list-style-type: none"> • Contact <i>Our Administrator</i> at 1-866-374-1129 (toll-free) from Canada or the U.S., or +1-416-977-4425 (collect) from other countries before seeking <i>Treatment</i> or <i>Your</i> benefits may be limited or denied. • In the event of a claim <i>Your</i> prior medical history may be reviewed. <p>IT IS YOUR RESPONSIBILITY TO UNDERSTAND YOUR COVERAGE. Please read <i>Your Certificate</i> for specific coverage, details, limitations and exclusions. If <i>You</i> have questions call 1-866-374-1129 or visit td.com/agreements</p>
Travel Medical Insurance	<p>SECTION 1 – SUMMARY OF BENEFITS</p> <p>Benefit <i>Medical Emergency</i> Insurance</p> <p>Maximum Benefit Payable \$5,000,000 per <i>Insured Person</i> per <i>Covered Trip</i>.</p>	<p>Section 1 – Summary of Benefits</p> <p>No change.</p>

<p>Travel Medical Insurance</p>	<p>SECTION 2 – DEFINITIONS In this <i>Certificate</i>, the following words and phrases shown in italics have the meanings shown below. As <i>You</i> read through the <i>Certificate</i>, <i>You</i> may need to refer to this section to ensure <i>You</i> have a full understanding of <i>Your</i> coverage, limitations and exclusions.</p> <p>Account means the <i>Primary Cardholder's</i> TD Credit Card <i>Account</i> that the <i>Bank</i> maintains.</p> <p>Additional Cardholder means a person to whom a TD Credit Card has been issued at the authorization of the <i>Primary Cardholder</i>.</p> <p>Administrator means the company <i>We</i> select to provide medical and claims assistance, claims payment, administrative and adjudication services under the Group Policy.</p> <p>Bank means The Toronto-Dominion Bank.</p> <p>Certificate means this certificate of insurance.</p> <p>Coverage Period means the period of time during which a <i>Medical Emergency</i> must occur for a benefit to be payable. This period is defined in section 5.</p> <p>Covered Trip means a trip:</p> <ul style="list-style-type: none"> • made by an <i>Insured Person</i> outside the <i>Insured Person's</i> province or territory of residence; • that does not exceed <i>the Maximum Number of Covered Days</i>, including the departure date; and • that does not extend to or past: <ul style="list-style-type: none"> • the date the <i>Insured Person</i> no longer meets the eligibility requirements set out in section 3; or • the date coverage terminates as described in section 4. <p>Note: In the event of a claim, <i>the Insured Person</i> will be required to submit proof of the departure. Only a <i>Medical Emergency</i> occurring during a <i>Covered Trip</i> will be eligible for consideration. Note that the day of departure counts as a full day for this purpose.</p> <p>Exclusions:</p> <ul style="list-style-type: none"> • A <i>Covered Trip</i> does not include any trip for the purpose of commuting to or from an <i>Insured Person's</i> usual place of employment. • Coverage is only provided under the Group Policy if the <i>Medical Emergency</i> occurs within the <i>Maximum Number of Covered Days</i> that the <i>Insured Person</i> is first away from his or her province or territory of residence. Note that the day of departure counts as a full day for this purpose. <p>Note: If the <i>Insured Person's</i> trip exceeds the <i>Maximum Number of Covered Days</i>, the <i>Insured Person</i> may want to purchase separate insurance under a different TD Life group policy for the number of days that the trip will exceed the <i>Maximum Number of Covered Days</i>. Different terms and conditions will apply and, depending on the <i>Insured Person's</i> age and the length of their trip, the <i>Insured Person</i> may be required to provide information about their health. Call TD Life prior to <i>Your</i> departure date at 1-866-374-1129 for more information or if <i>You</i> would like to obtain a quote.</p>	<p>Section 4 – Definitions In this <i>Certificate</i>, the following words and phrases capitalized and italicized have the meanings shown below. As <i>You</i> read through the <i>Certificate</i>, <i>You</i> may need to refer to this Section to ensure <i>You</i> have a full understanding of <i>Your</i> coverage, limitations and exclusions.</p> <p>Account means the <i>Primary Cardholder's</i> TD Credit Card <i>Account</i> that the <i>Bank</i> maintains.</p> <p>Additional Cardholder means a person to whom a TD Credit Card has been issued at the authorization of the <i>Primary Cardholder</i>.</p> <p>Bank means The Toronto-Dominion Bank.</p> <p>Certificate means this Certificate of Insurance.</p> <p>Coverage Period means the time between when the eligible <i>Insured Person</i> departs on a <i>Covered Trip</i> and the return date up to the <i>Maximum Number of Covered Days</i>. Please see Section 7 – “How to Become Insured or Extend Coverage” of the Certificate for full details.</p> <p>Covered Trip means a trip:</p> <ul style="list-style-type: none"> • made by an <i>Insured Person</i> outside the <i>Insured Person's</i> province or territory of residence; • that does not exceed the <i>Maximum Number of Covered Days</i>, including the <i>Departure Date</i>; and • that does not extend to or past: <ul style="list-style-type: none"> • the date the <i>Insured Person</i> no longer meets the eligibility requirements; or • the date coverage terminates. <p>Note: In the event of a claim, the <i>Insured Person</i> will be required to submit proof of the departure. Only a <i>Medical Emergency</i> occurring during a <i>Covered Trip</i> will be eligible for consideration. Note that the day of departure counts as a full day for this purpose.</p> <p>Exclusions:</p> <ul style="list-style-type: none"> • A <i>Covered Trip</i> does not include any trip for the purpose of commuting to or from an <i>Insured Person's</i> usual place of employment. • Coverage is only provided under the Group Policy if the <i>Medical Emergency</i> occurs within the <i>Maximum Number of Covered Days</i> that the <i>Insured Person</i> is first away from their province or territory of residence. Note that the day of departure counts as a full day for this purpose. <p>Note: If the <i>Insured Person's</i> trip exceeds the <i>Maximum Number of Covered Days</i>, the <i>Insured Person</i> may want to purchase separate insurance under a different TD Life group policy for the number of days that the trip will exceed the <i>Maximum Number of Covered Days</i>. Different terms and conditions will apply and, depending on the <i>Insured Person's</i> age and the length of their trip, the <i>Insured Person</i> may be required to provide information about their health. Call <i>Our Administrator</i> at 1-866-374-1129 prior to <i>Your Departure Date</i> for more information or if <i>You</i> would like to obtain a quote.</p> <p>Departure Date means the date the <i>Insured Person</i> left their home province/territory of residence.</p> <p>Dependent Children mean <i>Your</i> natural, adopted, or stepchildren who are:</p> <ul style="list-style-type: none"> • unmarried; • dependent on <i>You</i> for financial maintenance and support; and • under 22 years of age; or • under 26 years of age and attending an institution of higher learning, full time, in Canada; or • mentally or physically handicapped. <p>Dollars and \$ mean Canadian dollars.</p>
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	<p>Dependent Children means <i>Your</i> natural, adopted, or step-children who are:</p> <ul style="list-style-type: none"> • unmarried; • dependent on <i>You</i> for financial maintenance and support; and <ul style="list-style-type: none"> • under 22 years of age; or • under 26 years of age and attending an institution of higher learning, full-time, in Canada; or • mentally or physically handicapped. <p>Exclusion: A <i>Dependent Child</i> does not include a child born while the child's mother is outside her province or territory of residence during the <i>Covered Trip</i>. The child will not be insured with respect to that trip.</p> <p>Dollars and \$ mean Canadian dollars.</p> <p>Effective Date means the date this <i>Certificate</i> takes effect with respect to <i>You</i>, and is the later of March 17, 2008, and the date on which an <i>Account</i> is opened by the <i>Bank</i> for <i>You</i> and <i>You</i> meet the eligibility requirements set out in section 3 with respect to this <i>Account</i>.</p> <p>Eligible Medical Emergency Expenses are defined in section 6.</p> <p>Emergency Medical Benefit is defined in section 6.</p> <p>Government Health Insurance Plan (GHIP) means a Canadian provincial or territorial government health insurance plan.</p> <p>Good Standing: An <i>Account</i> is in <i>Good Standing</i> if:</p> <ul style="list-style-type: none"> • the <i>Primary Cardholder</i> has applied for the <i>Account</i>; • the <i>Bank</i> has approved and opened the <i>Account</i>; • the <i>Primary Cardholder</i> has not advised the <i>Bank</i> to close the <i>Account</i>; and • the <i>Bank</i> has not suspended or revoked credit privileges or otherwise closed the <i>Account</i>. <p>Hospital means</p> <ul style="list-style-type: none"> • an institution that has been accredited and licensed by the appropriate authority as a Hospital to treat patients on an in-patient, outpatient and emergency basis; or • the nearest appropriate medical facility that has been approved in advance by <i>Our Administrator</i>. <p>Exclusion: <i>Hospital</i> does not include chronic care, convalescent or nursing home facilities.</p> <p>Hospitalized or Hospitalization means confined as an in-patient in a <i>Hospital</i>.</p> <p>Insured Person means a person who is eligible to be insured under this <i>Certificate</i> as described in section 3.</p> <p>Maximum Number of Covered Days means 31 consecutive days for <i>Insured Persons</i> under 65 years of age and 4 consecutive days for <i>Insured Persons</i> 65 years of age or older. The departure date counts as one full day for this purpose. Age will be measured as of the date of departure for this purpose.</p> <p>Medical Condition means an irregularity in the health of an <i>Insured Person</i> which required or requires medical advice, consultation, investigation, <i>Treatment</i>, care, service or diagnosis by a <i>Physician</i>.</p>	<p>Eligible Medical Emergency Expenses are defined in Section 5 – “Description of Insurance Coverage”.</p> <p>Government Health Insurance Plan (GHIP) means a Canadian provincial or territorial government health insurance plan.</p> <p>Good Standing means an <i>Account</i> is in <i>Good Standing</i> if:</p> <ul style="list-style-type: none"> • the <i>Primary Cardholder</i> has applied for the <i>Account</i>; • the <i>Bank</i> has approved and opened the <i>Account</i>; • the <i>Primary Cardholder</i> has not advised the <i>Bank</i> to close the <i>Account</i>; and • the <i>Bank</i> has not suspended or revoked credit privileges or otherwise closed the <i>Account</i>. <p>Hospital means:</p> <ul style="list-style-type: none"> • an institution that is licensed as an accredited hospital that is staffed and operated for the care and <i>Treatment</i> of in-patient and outpatients. <i>Treatments</i> must be supervised by <i>Physicians</i> and there must be registered nurses on duty 24 hours a day. Diagnostic and surgical capabilities must also exist on the premises or in facilities controlled by the establishment; • a <i>Hospital</i> is not an establishment used mainly as a clinic, extended or palliative care facility, rehabilitation facility, addiction treatment centre, convalescent, rest or nursing home, home for the aged or health spa. <p>Hospitalized or Hospitalization means confined as an in-patient in a <i>Hospital</i>.</p> <p>Immediate Family Member means an <i>Insured Person's</i>:</p> <ul style="list-style-type: none"> • <i>Spouse</i>, parents, stepparent, grandparents, natural or adopted children, stepchildren or legal ward, grandchildren, brothers, sisters, stepbrothers, stepsisters, aunts, uncles, nieces, nephews; and • mother-in-law, father-in-law, brothers-in-law, sisters-in-law, sons-in-law, daughters-in-law; and • the <i>Insured Person's Spouse's</i> grandparents, brothers-in-law and sisters-in-law. <p>Insured Person means a person who is eligible to be insured under this <i>Certificate</i> described in Section 3 – “Eligibility”.</p> <p>Maximum Number of Covered Days means the first 31 consecutive days for <i>Insured Persons</i> 64 years of age and under, and the first 4 consecutive days for <i>Insured Persons</i> 65 years of age or older. The <i>Departure Date</i> counts as 1 full day for this purpose. Age will be measured as of the <i>Departure Date</i> for this purpose.</p> <p>Medical Condition means any disease, illness, or injury (including symptoms of undiagnosed conditions; complication of pregnancy within the first 31 weeks of pregnancy; a mental or emotional disorder, including acute psychosis that requires admission to a <i>Hospital</i>).</p> <p>Medical Emergency means a sudden and unforeseen <i>Medical Condition</i> that occurs during the <i>Covered Trip</i> and requires immediate <i>Treatment</i>. A <i>Medical Emergency</i> no longer exists when the evidence reviewed by <i>Our Administrator</i> indicates that no further <i>Treatment</i> is required at destination or <i>You</i> are able to return to <i>Your</i> province/territory of residence for further <i>Treatment</i>.</p> <p>Mountaineering means the ascent or descent of a mountain requiring the use of specialized equipment, including crampons, pick-axes, anchors, bolts, carabineers or lead-rope or top-rope anchoring equipment.</p>
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Medical Emergency means any unforeseen illness or accidental bodily injury occurring during a *Covered Trip* that requires immediate emergency medical *Treatment* by a *Physician*.

Physician means a Physician or surgeon who is registered or licensed to practice medicine in the jurisdiction where he or she provides medical advice or *Treatment* and who is not related by blood or marriage to any *Insured Person* under this *Certificate*.

Pre-Existing Condition means a *Medical Condition*:

- for which symptoms appeared in the *Pre-Existing Condition Period*;
- that was investigated, diagnosed or *Treated* during the *Pre-Existing Condition Period*, where *Treatment* includes medication; or
- for which further investigation was recommended or prescribed, or for which a change in *Treatment* was recommended (including a change in medication or dosage) during the *Pre-Existing Condition Period*.

Pre-Existing Condition Period with respect to any benefit under this *Certificate* is as follows:

- Insured Persons under 65 years of age – 90 days immediately before the beginning of the *Coverage Period*; and
- Insured Persons 65 years of age or older – 180 days immediately before the beginning of the *Coverage Period*.

Primary Cardholder means a person who applied for a TD Credit Card, whose name is on the *Account* and to whom a TD Credit Card has been issued. A *Primary Cardholder* does not include an *Additional Cardholder*.

Spouse means:

- the *Insured Person's* legal husband or wife; or
- the person who the *Insured Person* has lived with for at least one year and publicly represented as his or her domestic partner.

Stable means any *Medical Condition* or related condition (whether or not the diagnosis has been determined) for which there have been:

- no new or change in medication or dosage;
- no new or change in *Treatment*;
- no new or increase in frequency or severity of symptoms;
- no referral or recommendation to see a specialty clinic or specialist;
- no pending test results or testing; or
- no pending surgery or other *Treatment*.

Travelling Companion means someone who shares trip arrangements and accommodations with *You*.

Exceptions: No more than three (3) individuals (including *You*) will be considered travel companions on any one trip.

Treated or Treatment means any medical, therapeutic or diagnostic procedure prescribed, performed or recommended by a *Physician*, including but not limited to prescribed or unprescribed medication, investigative testing and surgery. The term "treatment" does not include the

Physician means a person who is not *You* or *Your Immediate Family Member* or *Your Travelling Companion*, licensed in the jurisdiction where the services are provided, to prescribe and administer medical treatment.

Pre-Existing Medical Condition means any *Medical Condition* that exists in the *Pre-existing Medical Condition Period*.

Pre-Existing Medical Condition Period with respect to any benefit under this *Certificate* is as follows:

- *Insured Persons* 64 years of age and under – 90 days immediately before the beginning of the *Coverage Period*; and
- *Insured Persons* 65 years of age or older – 180 days immediately before the beginning of the *Coverage Period*.

Primary Cardholder means a person who applied for a TD Credit Card, whose name is on the *Account* and to whom a TD Credit Card has been issued. A *Primary Cardholder* does not include an *Additional Cardholder*.

Spouse means:

- the person who the *Insured Person* is legally married to; or
- the person the *Insured Person* has lived with for at least 1 continuous year in the same household and publicly refers to as their partner.

Stable: a *Medical Condition*, is considered *Stable* when all of the following statements are true:

1. There has not been any new *Treatment* prescribed or recommended, or change(s) to existing *Treatment* (including a stoppage in *Treatment*); and
2. there has not been any change to any existing prescribed drug (including an increase, decrease, or stoppage to prescribed dosage), or any recommendation or starting of a new Prescription Drug; and
3. the *Medical Condition* has not become worse; and
4. there has not been any new, more frequent or more severe symptoms; and
5. there has been no *Hospitalization* or referral to a specialist; and
6. there have not been any tests, investigation or *Treatment* recommended, but not yet complete, nor any outstanding test results; and
7. there is no planned or pending *Treatment*.

All of the above conditions must be met for a *Medical Condition* to be considered *Stable*.
Note: The following exceptions are considered *Stable*:

- the routine adjustment of Coumadin, warfarin or insulin (as long as they are not newly prescribed or stopped) and there has been no change in *Your Medical Condition*; or
- a change from a brand name medication to a generic brand medication of the same dosage.

Travelling Companion means any person who travels with *You* during the *Covered Trip* and who is sharing transportation and/or accommodation with *You*.
Exceptions: No more than 3 individuals (including *You*) will be considered travel companions on any one trip.

Treated or Treatment means a procedure prescribed, performed or recommended by a *Physician* or other authorized health care professional for a *Medical Condition*. This includes but is not limited to prescribed medication, investigative testing or surgery.

Changes to your Certificate of Insurance, as of March 24, 2022

Benefit	Before	After
	<p>unaltered use of prescribed medication for a <i>Medical Condition</i> which is <i>Stable</i>. Usual, Customary and Reasonable Charges means charges that do not exceed the general level of charges made by other providers of similar standing in the geographical area where charges are incurred for comparable <i>Treatment</i>, services or supplies for a similar <i>Medical Emergency</i>. We, Us and Our mean TD Life Insurance Company. You and Your mean the <i>Primary Cardholder</i>.</p>	<p>Usual, Customary and Reasonable Charges mean charges that do not exceed the general level of charges made by other providers of similar standing in the geographical area where charges are incurred for comparable <i>Treatment</i>, services or supplies for a similar <i>Medical Emergency</i>. We, Us and Our mean TD Life Insurance Company. You and Your mean the <i>Primary Cardholder</i>.</p>

<p>Travel Medical Insurance</p>	<p>SECTION 3 – ELIGIBILITY The Primary Cardholder is eligible to be insured under this Certificate if, throughout the Covered Trip, the Primary Cardholder:</p> <ul style="list-style-type: none"> • is a resident of Canada; • is covered by a Canadian provincial or territorial GHIP; and • has an Account in Good Standing. <p>The Primary Cardholder's Spouse is eligible to be insured under this Certificate if, throughout the Covered Trip:</p> <ul style="list-style-type: none"> • the Primary Cardholder is eligible to be insured under this Certificate as described above, even if the Primary Cardholder is not travelling; and • the Spouse: <ul style="list-style-type: none"> • is a resident of Canada; • is covered by a Canadian provincial or territorial GHIP; and • continues to meet the definition of Spouse of the Primary Cardholder. <p>The Primary Cardholder's Dependent Child is eligible to be insured under this Certificate whether or not the Primary Cardholder or the Primary Cardholder's Spouse travels with them if, throughout the Covered Trip:</p> <ul style="list-style-type: none"> • the Primary Cardholder is eligible to be insured under this Certificate as described above, even if the Primary Cardholder is not travelling; and • the Dependent Child: <ul style="list-style-type: none"> • is a resident of Canada; • is covered by a Canadian provincial or territorial GHIP; and • continues to meet the definition of Dependent Child. <p>Exclusion: If a Dependent Child is born while the child's mother is outside of her province of residence, the Dependent Child will not be insured with respect to that trip.</p> <p>An Additional Cardholder is eligible to be insured under this Certificate if, throughout the Covered Trip:</p> <ul style="list-style-type: none"> • the Primary Cardholder is eligible to be insured under this Certificate as described above, even if the Primary Cardholder is not travelling; and • the Additional Cardholder: <ul style="list-style-type: none"> • is a resident of Canada; • is covered by a Canadian provincial or territorial GHIP; and • continues to meet the definition of Additional Cardholder. <p>Note: The Spouse and children of an Additional Cardholder are not automatically eligible for coverage under this Certificate unless they meet other eligibility requirements set out above (e.g. if the child of an Additional Cardholder is also the Dependent Child of the Primary Cardholder).</p> <p>Coverage after the Maximum Number of Covered Days:</p> <ul style="list-style-type: none"> • This Certificate does not offer any coverage after the end of the Maximum Number of Covered Days. • If an Insured Person under age 65 is planning a trip that will last more than 31 days, or an Insured Person aged 65 or older is planning a trip that will last more than 4 days, the Insured Person may want to 	<p>Section 3 – Eligibility The Primary Cardholder is eligible to be insured under this <i>Certificate</i> if, throughout the <i>Covered Trip</i>, the <i>Primary Cardholder</i>:</p> <ul style="list-style-type: none"> • is a resident of Canada; • is covered under a <i>GHIP</i> or a valid health care plan in Canada for members of the Canadian Armed Forces; and • has an <i>Account</i> in <i>Good Standing</i>. <p>The Primary Cardholder's Spouse is eligible to be insured under this <i>Certificate</i> if, throughout the <i>Covered Trip</i>:</p> <ul style="list-style-type: none"> • the <i>Primary Cardholder</i> is eligible to be insured under this <i>Certificate</i> as described above, even if the <i>Primary Cardholder</i> is not travelling; and • the <i>Spouse</i>: <ul style="list-style-type: none"> • is a resident of Canada; • is covered under a <i>GHIP</i> or a valid health care plan in Canada for members of the Canadian Armed Forces; and • continues to meet the definition of <i>Spouse</i> of the <i>Primary Cardholder</i>. <p>The Primary Cardholder's Dependent Child is eligible to be insured under this <i>Certificate</i> whether or not the <i>Primary Cardholder</i> or the <i>Primary Cardholder's Spouse</i> travels with them if, throughout the <i>Covered Trip</i>:</p> <ul style="list-style-type: none"> • the <i>Primary Cardholder</i> is eligible to be insured under this <i>Certificate</i> as described above, even if the <i>Primary Cardholder</i> is not travelling; and • the <i>Dependent Child</i>: <ul style="list-style-type: none"> • is a resident of Canada; • is covered under a <i>GHIP</i> or a valid health care plan in Canada for members of the Canadian Armed Forces; and • continues to meet the definition of <i>Dependent Child</i>. <p>Exclusion: If a <i>Dependent Child</i> is born while the child's mother is outside of her province or territory of residence, the <i>Dependent Child</i> will not be eligible to be insured with respect to that trip.</p> <p>An Additional Cardholder is eligible to be insured under this <i>Certificate</i> if, throughout the <i>Covered Trip</i>:</p> <ul style="list-style-type: none"> • the <i>Primary Cardholder</i> is eligible to be insured under this <i>Certificate</i> as described above, even if the <i>Primary Cardholder</i> is not travelling; and • the <i>Additional Cardholder</i>: <ul style="list-style-type: none"> • is a resident of Canada; • is covered under a <i>GHIP</i> or a valid health care plan in Canada for members of the Canadian Armed Forces; and • continues to meet the definition of <i>Additional Cardholder</i>. <p>Note: The <i>Spouse</i> and children of an <i>Additional Cardholder</i> are not eligible for coverage under this <i>Certificate</i> unless they meet other eligibility requirements set out above (e.g., if the child of an <i>Additional Cardholder</i> is also the <i>Dependent Child</i> of the <i>Primary Cardholder</i>).</p> <p>Coverage after the <i>Maximum Number of Covered Days</i>:</p> <ul style="list-style-type: none"> • This <i>Certificate</i> does not offer any coverage after the end of the <i>Maximum Number of Covered Days</i>. • If an <i>Insured Person</i> 64 years of age and under is planning a trip that will last more than 31 days, or an <i>Insured Person</i> 65 years of age or older is planning a trip that will last more than 4 days, the <i>Insured Person</i> may want to purchase separate insurance for the number of days that the trip will exceed the <i>Maximum Number of Covered Days</i>.
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Changes to your Certificate of Insurance, as of March 24, 2022

Benefit	Before	After
	<p>purchase separate insurance for the number of days that the trip will exceed the Maximum Number of Covered Days.</p> <ul style="list-style-type: none"> • Coverage may be available under a different TD Life group policy. Different terms and conditions will apply and, depending on the Insured Person's age and the length of their trip, the Insured Person may be required to provide information about their health. <p>Call TD Life prior to Your departure date at 1-866-374-1129 for more information or if You would like to obtain a quote.</p>	<ul style="list-style-type: none"> • Coverage may be available under a different TD Life group policy. Different terms and conditions will apply and, depending on the <i>Insured Person's</i> age and the length of their trip, the <i>Insured Person</i> may be required to provide information about their health. Call <i>Our Administrator</i> at 1-866-374-1129 prior to <i>Your Departure Date</i> for more information or if <i>You</i> would like to obtain a quote.
Travel Medical Insurance	<p>SECTION 4 – WHEN COVERAGE TERMINATES Coverage for the <i>Primary Cardholder</i> under this <i>Certificate</i> will terminate on the earliest of the following dates: • the date the <i>Account</i> is cancelled, closed or otherwise ceases to be in <i>Good Standing</i>; • the date <i>You</i> cease to be eligible for coverage; and • the date the Group Policy terminates. Coverage for an <i>Insured Person</i> other than the <i>Primary Cardholder</i> under this <i>Certificate</i> will terminate on the earliest of the following dates: • the date coverage terminates for the Primary Cardholder; and • the date the <i>Insured Person</i> ceases to be eligible for coverage. No benefits will be paid under this <i>Certificate</i> for losses incurred after coverage has terminated.</p>	<p>Section 7 – How to Become Insured or Extend Coverage</p> <p>When Your Coverage Terminates: Coverage for the <i>Primary Cardholder</i> under this <i>Certificate</i> will terminate on the earliest of the following dates:</p> <ul style="list-style-type: none"> • the date the <i>Account</i> is cancelled, closed or otherwise ceases to be in <i>Good Standing</i>; • the date <i>You</i> cease to be eligible for coverage; or • the date the Group Policy terminates. <p>Coverage for an <i>Insured Person</i> other than the <i>Primary Cardholder</i> under this <i>Certificate</i> will terminate on the earliest of the following dates:</p> <ul style="list-style-type: none"> • the date coverage terminates for the <i>Primary Cardholder</i>; or • the date the <i>Insured Person</i> ceases to be eligible for coverage. <p>No benefits will be paid under this <i>Certificate</i> for losses incurred after coverage has terminated.</p>

Changes to your Certificate of Insurance, as of March 24, 2022

Benefit	Before	After
<p>Travel Medical Insurance</p>	<p>SECTION 5 – THE COVERAGE PERIOD</p> <p>The Coverage Period begins when the eligible Insured Person departs on a Covered Trip.</p> <p>Note: The Insured Person's trip may be longer than the Maximum Number of Covered Days (31 consecutive days for Insured Persons under age 65, and 4 consecutive days for Insured Persons aged 65 or older). However, only a Medical Emergency occurring within the first Maximum Number of Covered Days following the departure from the Insured Person's province or territory of residence will be considered.</p> <p>The day of departure counts as a full day for this purpose.</p> <p>The Coverage Period ends on the earlier of:</p> <ul style="list-style-type: none"> • the date the Insured Person returns from the Covered Trip; • the end of the Maximum Number of Covered Days for that Insured Person, except as described below; • the date the Group Policy terminates. <p>However, if an Insured Person is suffering from a Medical Emergency at the end of the Maximum Number of Covered Days for that Insured Person (the "Termination Date"), then the Coverage Period:</p> <ul style="list-style-type: none"> • for that Insured Person; and • for any other Insured Person if • Our Administrator has approved a Travelling Companion Benefit for that other Insured Person; and • That other Insured Person was insured under this Certificate with respect to the Covered Trip at the Termination Date is automatically extended to 72 hours following the end of the Medical Emergency. <p>However, under no circumstances will coverage continue after termination of the Group Policy.</p> 	<p>Section 7 – How to Become Insured or Extend Coverage</p> <p>How to Become Insured</p> <p>You will have coverage if You meet the Eligibility Requirements for insurance described under Section 3 – "Eligibility".</p> <p>When does Coverage Start and End</p> <p>When Your Coverage Period Starts:</p> <p>The Coverage Period begins on the Insured Person's Departure Date for their Covered Trip.</p> <p>Note: If the Insured Person's trip is longer than the Maximum Number of Covered Days (31 consecutive days for Insured Persons 64 years of age and under, and 4 consecutive days for Insured Persons 65 years of age or older), then only a Medical Emergency occurring within the first Maximum Number of Covered Days following the departure from the Insured Person's province or territory of residence will be eligible for coverage. The day of departure counts as a full day for this purpose.</p> <p>When Your Coverage Period Ends:</p> <p>Your Coverage Period ends on the earliest of the following:</p> <ul style="list-style-type: none"> • the date the Insured Person returns to their province/territory of residence from the Covered Trip; or • the end of the Maximum Number of Covered Days for that Insured Person (except as described in the Automatic Extension of Coverage section); or • the date the Group Policy terminates. <p>Automatic Extension of Coverage</p> <p>If an Insured Person is suffering from a Medical Emergency at the end of the Maximum Number of Covered Days for that Insured Person (the "Termination Date"), then the Coverage Period is automatically extended to 72 hours following the end of the Medical Emergency:</p> <ul style="list-style-type: none"> • for that Insured Person; and • for any other Insured Person if: <ul style="list-style-type: none"> • Our Administrator has approved a Travelling Companion Benefit for that other Insured Person; and • that other Insured Person was insured under this Certificate with respect to the Covered Trip at the Termination Date. <p>However, under no circumstances will coverage continue after termination of the Group Policy or the Account.</p> <p>How to Top Up the Coverage Period</p> <p>You can apply to top up the Coverage Period by contacting Our Administrator. Coverage may be available under a different TD Life group policy. Different terms and conditions will apply and, depending on the Insured Person's age and the length of their trip, the Insured Person may be required to provide information about their health. Call Our Administrator at 1-866-374-1129 prior to Your Departure Date for more information or if You would like to obtain a quote.</p>

<p>Travel Medical Insurance</p>	<p>SECTION 6 – WHAT YOUR INSURANCE COVERS – EMERGENCY MEDICAL INSURANCE</p> <p>We will pay a Medical Emergency Benefit if an Insured Person suffers a Medical Emergency during the Coverage Period for a Covered Trip. Emergency Medical Benefit means, subject to the Maximum Benefit Payable described in section 1, the Usual, Customary and Reasonable Charges for Eligible Medical Emergency Expenses, less all amounts payable or reimbursable under a GHIP or any group or individual health plans or insurance policies. Eligible Medical Emergency Expenses means:</p> <ul style="list-style-type: none"> • Hospital accommodation; • Physicians' bills; • Private duty nursing; • up to \$5,000 for: • services performed by a registered nurse; including • medically necessary nursing supplies; • Diagnostic services: • charges for diagnostic tests, laboratory tests and X-rays which are: • prescribed by the treating Physician; and • approved in advance by Our Administrator if the tests involve: • magnetic resonance imaging (MRI); • computerized axial tomography (CAT) scans; • sonograms; • ultrasounds; or • any invasive diagnostic procedures including angioplasty; • Ambulance: • charges for emergency ambulance service to the nearest approved Hospital; • Air Ambulance: • charges for emergency air ambulance only if: • Our Administrator determines that the Insured Person's physical condition precludes the use of any other means of transportation; • Our Administrator makes the determination before the service is provided; • Our Administrator pre-approves this service; and • Our Administrator arranges this service; • Prescriptions: • reimbursement of prescription drugs that are required as part of emergency Treatment; <p>Exclusion: vitamins and patent, proprietary and experimental drugs are excluded;</p> <ul style="list-style-type: none"> • Accidental Dental: • up to \$2,000 for dental Treatment that is: • required during a Coverage Period; and • necessitated by a blow to natural or permanently installed 	<p>Section 5 – Description of Insurance Coverage</p> <p>Travel Medical Emergency Coverage</p> <p>Travel Medical Emergency coverage provides benefits to travellers in emergency medical situations outside of Your province/territory of residence. We will pay a Medical Emergency Benefit if an Insured Person suffers a Medical Emergency during the Coverage Period on a Covered Trip.</p> <p>Medical Emergency Benefit means, subject to the maximum benefit payable of up to \$5,000,000 or the benefit amount payable described below (whichever is lower), the Usual, Customary and Reasonable Charges for Eligible Medical Emergency Expenses, less all amounts payable or reimbursable under a GHIP or any group or individual health plans or insurance policies.</p> <p>Eligible Medical Emergency Expenses mean:</p> <ol style="list-style-type: none"> 1. Hospital benefit: Attendance at a Hospital for Treatment as an inpatient, outpatient, and emergency basis, when approved in advance by Our Administrator. 2. Physicians' bills: Fees charged by a Physician, when required as part of Treatment for a Medical Emergency and approved in advance by Our Administrator. 3. Private duty nursing: Up to \$5,000 for services performed and deemed necessary by a registered nurse; including medically necessary nursing supplies. 4. Diagnostic services: <ul style="list-style-type: none"> • Charges for diagnostic tests, laboratory tests and X-rays, which are: • prescribed by the treating Physician; and • approved in advance by Our Administrator if the tests involve: <ul style="list-style-type: none"> - magnetic resonance imaging (MRI); - computerized axial tomography (CAT) scans; - sonograms; - ultrasounds; or - any invasive diagnostic procedures including angioplasty. 5. Ambulance: <ul style="list-style-type: none"> • charges for emergency ambulance service to the nearest approved Hospital. 6. Air Ambulance: <ul style="list-style-type: none"> • charges for emergency air ambulance only if: <ul style="list-style-type: none"> • Our Administrator determines that the Insured Person's physical condition precludes the use of any other means of transportation; and • Our Administrator makes the determination before the service is provided; and • Our Administrator pre-approves this service; and • Our Administrator arranges this service. 7. Prescription Drugs: <ul style="list-style-type: none"> • reimbursement of prescription drugs prescribed during the Covered Trip and required as part of emergency Treatment. <p>Exclusion: Vitamins and patent, proprietary and experimental drugs are excluded.</p> <ol style="list-style-type: none"> 8. Accidental Dental: Up to \$2,000 for dental Treatment that is: <ul style="list-style-type: none"> • required during the Coverage Period; and • necessary because of a blow to natural or permanently installed teeth, which results from an accident causing a Medical Emergency. 9. Emergency relief of dental pain: Treatment for emergency relief of dental pain is covered up to a maximum of \$200.
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	<p>teeth which occurs during a Coverage Period; Limitation: Treatment for emergency relief of dental pain is covered up to a maximum of \$200;</p> <ul style="list-style-type: none"> • Medical Appliances • cost of casts, crutches, trusses, braces, slings, splints and/or the rental cost of a wheelchair or walker where: <ul style="list-style-type: none"> • prescribed by a Physician; and • required as a result of a Medical Emergency; • Return Airfare • the extra cost for a one-way economy fare plus, if required to accommodate a stretcher, a second one-way economy fare if: <ul style="list-style-type: none"> • as a result of a Medical Emergency, Our Administrator determines that an Insured Person should return to Canada for medical reasons; and • Our Administrator approves the transportation in advance; • Transportation to Bedside • if an Insured Person is Hospitalized and is expected to remain Hospitalized for at least three consecutive days, the cost of one round-trip economy airfare from Canada if it is: <ul style="list-style-type: none"> • for the Insured Person's Spouse, parent, child, brother or sister; and • approved in advance by Our Administrator; • Travelling Companion Benefit • the cost of a single one-way economy airfare if: <ul style="list-style-type: none"> • an Insured Person suffers a covered Medical Emergency; • as a result, a Travelling Companion stays beyond his or her scheduled return date; and • Our Administrator approves, in advance, the cost of a one-way economy airfare back to the Travelling Companion's place of departure; • Bedside Companion Benefit • up to \$150 per day, to a maximum of \$1,500, for food and accommodation for a person if: <ul style="list-style-type: none"> • Our Administrator has approved transportation for the person under either a Transportation to Bedside benefit or a Travelling Companion Benefit; and • Our Administrator has approved the Bedside Companion Benefit in advance; • Vehicle Return • up to \$1,000 toward the cost of returning an Insured Person's vehicle to his or her home or, if applicable, the nearest appropriate vehicle rental agency if: <ul style="list-style-type: none"> • the Insured Person is unable to return the vehicle due to a covered Medical Emergency; and • Our Administrator arranges for the return of the vehicle; • Return of Deceased • up to \$5,000 toward the cost of preparation and transportation home of a deceased 	<p>10. Medical Appliances: cost of casts, crutches, trusses, braces, slings, splints, medical walking boots and/or the rental cost of a wheelchair or walker if: <ul style="list-style-type: none"> • prescribed by a <i>Physician</i>; and • required as a result of a <i>Medical Emergency</i>. <p>11. Emergency return home: The cost for a one-way economy fare and, if required to accommodate a stretcher, a second one-way economy fare if: <ul style="list-style-type: none"> • as a result of a <i>Medical Emergency</i>, Our Administrator determines that an <i>Insured Person</i> should return to Canada for medical reasons; and • Our Administrator approves the transportation in advance. <p>12. Transportation to Bedside: if an <i>Insured Person</i> is <i>Hospitalized</i> and is expected to remain <i>Hospitalized</i> for at least 3 consecutive days, the cost of one round-trip economy airfare from <i>Your Bedside Companion's</i> province or territory of residence, if it is: <ul style="list-style-type: none"> • for the <i>Insured Person's Spouse</i>, parent, child, brother or sister; and • approved in advance by <i>Our Administrator</i>. <p>13. Bedside Companion Benefit</p> <ul style="list-style-type: none"> • up to \$150 per day, to a maximum of \$1,500, for food and accommodation for a person if: <ul style="list-style-type: none"> • <i>Our Administrator</i> has approved transportation for the person under either a Transportation to Bedside benefit or a <i>Travelling Companion</i> Benefit; and • <i>Our Administrator</i> has approved the Bedside Companion Benefit in advance. <p>14. Travelling Companion Benefit</p> <ul style="list-style-type: none"> • The cost of a single one-way economy airfare if: <ul style="list-style-type: none"> • an <i>Insured Person</i> suffers a covered <i>Medical Emergency</i>; and • as a result, a <i>Travelling Companion</i> stays beyond their scheduled return date; and • <i>Our Administrator</i> approves, in advance, the cost of a one-way economy airfare back to the <i>Travelling Companion's</i> place of departure. <p>15. Meals and accommodation</p> <ul style="list-style-type: none"> • Up to \$350 per day to a maximum of \$3,500, for <i>Your</i>: <ul style="list-style-type: none"> • commercial accommodations and meals; and • essential telephone calls and internet usage fees; and • taxi fares (or rental car in lieu of taxi fares). • If, upon a <i>Physician's</i> discretion, <i>You</i>, or <i>Your Travelling Companion</i>, are relocated to receive medical attention for a <i>Medical Emergency</i> covered under this insurance; or • <i>You</i> are delayed beyond <i>Your</i> return date in order to receive <i>Medical Emergency Treatment</i>; or • <i>Your Travelling Companion</i> requires <i>Medical Emergency Treatment</i> for any <i>Medical Condition</i> covered under this insurance. <p>Note: Subject to pre-authorization from <i>Our Administrator</i>.</p> <p>16. Incidental Hospital Expenses</p> <p>Up to \$50 per day to a maximum of \$500, for the <i>Insured Person's</i> incidental <i>Hospital</i> expenses (telephone calls, television rental, parking), while the <i>Insured Person</i> is <i>Hospitalized</i> for at least 48 hours.</p> <p>17. Vehicle Return: up to \$1,000 towards the cost of returning an <i>Insured Person's</i> vehicle to their home or the nearest appropriate vehicle rental agency if:</p> </p></p></p>
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Changes to your Certificate of Insurance, as of March 24, 2022

Benefit	Before	After
	<p>Insured Person if death results from a covered Medical Emergency;</p> <p>Exclusion: the cost of a burial casket or urn is not covered under this benefit; and</p> <ul style="list-style-type: none"> • one round-trip economy airfare if: • an Immediate Family Member is required to identify or obtain release of the deceased; and • Our Administrator approves this transportation in advance. <p>• Baggage Return</p> <p>• If an Insured Person returns to their province or territory of residence by air ambulance because of their Medical Emergency, this insurance covers the cost to return the Insured Person's baggage up to an overall maximum of \$500 per Covered Trip.</p>	<ul style="list-style-type: none"> • the <i>Insured Person</i> is unable to return the vehicle because of a <i>Medical Emergency</i>; and • <i>Our Administrator</i> arranges for the return of the vehicle. <p>18. Return of Deceased</p> <ul style="list-style-type: none"> • up to \$5,000 towards the cost of preparation and transportation home of a deceased <i>Insured Person</i> if death results from a covered <i>Medical Emergency</i>; or • one round-trip economy airfare, if: <ul style="list-style-type: none"> • an <i>Immediate Family Member</i> is required to identify or obtain release of the deceased; and • <i>Our Administrator</i> approves the transportation in advance. <p>Note: The cost of a burial casket or urn is not covered. The cost of funeral expenses at home province or territory is also not covered.</p> <p>19. Baggage Return</p> <ul style="list-style-type: none"> • If an <i>Insured Person</i> returns to their province or territory of residence by air ambulance because of their <i>Medical Emergency</i>, this insurance covers the cost to return the <i>Insured Person's</i> baggage up to an overall maximum of \$500 per <i>Covered Trip</i>.

<p>Travel Medical Insurance</p>	<p>SECTION 7 – LIMITATIONS AND EXCLUSIONS: WHAT YOUR INSURANCE DOES NOT COVER Limitations and exclusions that apply to a particular benefit are found above, in the description of those benefits. In addition, for all benefits, this Certificate does not cover any Treatment, services, or expenses of any kind caused directly or indirectly as a result of the following:</p> <ol style="list-style-type: none"> 1. Failure to report <ul style="list-style-type: none"> • A Medical Emergency must be reported to Our Administrator within 48 hours of admission to Hospital, or as soon as is reasonably possible. • If the Medical Emergency is not reported as required, the maximum benefit payable with respect to the Medical Emergency will be 80% of the Eligible Medical Emergency Expenses, to a limit of \$30,000. 2. Pre-Existing Condition <ul style="list-style-type: none"> • There is no coverage and no benefit will be paid for any Pre-Existing Condition that was not Stable during the Pre-Existing Condition Period immediately preceding the beginning of the Coverage Period. 3. Reasonably foreseeable conditions <ul style="list-style-type: none"> • No benefit will be payable with respect to a sickness, accidental injury or Medical Emergency that was reasonably foreseeable when the Insured Person departed on the Covered Trip. 4. Medical Emergency occurring outside the Coverage Period <ul style="list-style-type: none"> • No benefit will be payable with respect to a Medical Emergency that occurs before the Coverage Period begins or after it ends. • For an Insured Person under age 65, this means, for example, that no benefit will be paid with respect to any Medical Emergency if an Insured Person's Medical Emergency occurs after the first 31 days following an Insured Person's departure date from their province or territory of residence. • For an Insured Person 65 years of age or older, this means, for example, that no benefit will be paid with respect to any Medical Emergency if an Insured Person's Medical Emergency occurs after the first 4 days following an Insured Person's departure date from their province or territory of residence. • Note that the day of departure counts as a full day for this purpose. 5. Failure to transfer to an appropriate facility for Treatment <ul style="list-style-type: none"> • We, in consultation with the Insured Person's treating Physician, reserve the right to transfer an Insured Person to an appropriate medical facility or to his or her province or territory of residence for further Treatment. • Failure to comply with a transfer 	<p>Section 6 – Limitations and Exclusions Limitations and exclusions that apply to a particular benefit are found above, in the description of those benefits. In addition, for all benefits, this <i>Certificate</i> does not cover any <i>Treatment</i>, services, or expenses of any kind caused directly or indirectly as a result of the following:</p> <ol style="list-style-type: none"> 1. <i>Pre-Existing Medical Condition</i> There is no coverage and no benefit will be paid for any <i>Pre-Existing Medical Condition</i> that was not <i>Stable</i> during the <i>Pre-Existing Medical Condition Period</i> immediately preceding the beginning of the <i>Coverage Period</i>. <ul style="list-style-type: none"> • <i>Pre-Existing Medical Condition Period</i>: <ul style="list-style-type: none"> • For <i>Insured Persons</i> 64 years of age and under – 90 days immediately before the beginning of the <i>Coverage Period</i>; and • For <i>Insured Persons</i> 65 years of age or older – 180 days immediately before the beginning of the <i>Coverage Period</i>. 2. Failure to report <ul style="list-style-type: none"> • A <i>Medical Emergency</i> must be reported by <i>You</i> to <i>Our Administrator</i> within 48 hours of admission to a <i>Hospital</i>, or as soon as reasonably possible. If it is medically impossible for <i>You</i> to call, <i>We</i> ask that <i>You</i> have someone call <i>Our Administrator</i> on <i>Your</i> behalf within 48 hours of admission to a <i>Hospital</i>, or as soon as reasonably possible. • If the <i>Medical Emergency</i> is not reported as required, the maximum benefit payable with respect to the <i>Medical Emergency</i> will be 80% of the <i>Eligible Medical Emergency Expenses</i>, to a limit of \$30,000. 3. Failure to obtain advance approval <ul style="list-style-type: none"> • Where an <i>Eligible Medical Emergency Expense</i> specifies that it must be approved in advance by <i>Our Administrator</i>, if advance approval is not obtained, no benefit will be payable for that expense. • No benefit will be paid with respect to any surgery or invasive procedure that has not been approved in advance by <i>Our Administrator</i>, except in extreme circumstances where a request for prior approval would delay necessary surgery in a life-threatening medical crisis 4. <i>Treatment</i> once fit to transfer to another facility or return to <i>Your</i> home province or territory If <i>Our Administrator</i> determines that <i>You</i> should transfer to another facility or return to <i>Your</i> home province/territory of residence for <i>Treatment</i>, and <i>You</i> choose not to, benefits will not be paid for further medical <i>Treatment</i>. 5. Ongoing <i>Medical Emergency Treatment</i> requires pre-approval (Investigations, <i>Treatment</i> and surgery) After <i>Your Medical Emergency Treatment</i> has started, <i>Our Administrator</i> must assess and pre-approve additional medical <i>Treatment</i>. If <i>You</i> undergo tests as part of a medical investigation, <i>Treatment</i> or surgery, obtain <i>Treatment</i> or undergo surgery that is not pre-approved, <i>Your</i> claim will not be paid. This includes but not limited to invasive testing, surgery, cardiac catheterization, other cardiac procedures, transplant, and MRI. 6. Non-Emergency Services <i>We</i> will not pay a benefit with respect to non-<i>Medical Emergency</i>, experimental or elective <i>Treatment</i>, including: <ul style="list-style-type: none"> • cosmetic surgery, chronic care, rehabilitation including any expenses for directly or indirectly related complications; • placement of new crowns, bridges, dentures.
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	<p>request will absolve Us of any liability to provide benefits for expenses incurred after the scheduled transfer date.</p> <p>6. Recurrence</p> <ul style="list-style-type: none"> • A Medical Emergency is considered to have ended when medical evidence indicates that the Insured Person is able to return to his or her province or territory of residence. No benefits will be paid in connection with the condition that caused a Medical Emergency if they are incurred after that time. <p>7. Failure to obtain advance approval</p> <ul style="list-style-type: none"> • Where an Eligible Medical Emergency Expense specifies that it must be approved in advance by Our Administrator, if advance approval is not obtained, no benefit will be payable for that expense. • No benefit will be paid with respect to any surgery or invasive procedure that has not been approved in advance by Our Administrator, except in extreme circumstances where a request for prior approval would delay necessary surgery in a life-threatening medical crisis. <p>8. Non-emergency services</p> <ul style="list-style-type: none"> • No benefit will be payable with respect to non-emergency, experimental or elective services, including any Treatment, surgery or medication which medical evidence indicates that the Insured Person could have returned to Canada to receive. <p>9. General</p> <ul style="list-style-type: none"> • As noted above, the benefits payable under the Group Policy will be the actual cost of the covered expense less: <ul style="list-style-type: none"> • the amount reimbursable under GHIP; and • the amount reimbursable through any other insurance or health plan coverage. <p>10. In addition, no benefit will be payable in connection with Treatment, services or expenses related to or resulting from:</p> <ol style="list-style-type: none"> Misrepresentation <ul style="list-style-type: none"> • any Medical Condition for which You or an Insured Person provided Our Administrator or Us with false or inaccurate information regarding Hospitalizations, Treatment or medications; Pregnancy <ul style="list-style-type: none"> • pregnancy or childbirths within 9 weeks of expected delivery date; • any complication relating to pregnancy that occurs in the last 9 weeks leading up to the expected delivery date, or after the expected delivery date; • any child born during a Covered Trip; Intentionally inflicted injuries <ul style="list-style-type: none"> • intentionally inflicted injuries, suicide or attempted suicide, while either sane or insane; Failure to take medication <ul style="list-style-type: none"> • failure to take medication as prescribed by the Insured Person's 	<p>7. Recurrence or ongoing Treatment once Medical Emergency has ended</p> <ul style="list-style-type: none"> • We will not pay a benefit with respect to the continued Treatment, recurrence or complication of a Medical Condition or related condition, following Treatment during Your trip, if Our Administrator determines that Your Medical Emergency has ended. • We will not pay a benefit with respect to the continued Treatment, recurrence or complication of a Medical Condition or related condition where Treatment was received without notification to Our Administrator and Your Medical Emergency has ended. <p>8. Failure to meet the requirement to be covered by a GHIP or Canadian Armed Forces health care plan</p> <p>We will not pay a benefit if You are not covered under the GHIP of Your province or territory of residence prior to and for the entire duration of the trip. It is Your responsibility to check that You do have this coverage. There is no coverage if You do not have a valid GHIP. Members of the Canadian Armed Forces must have a valid health care plan in Canada prior to and for the entire duration of the Covered Trip.</p> <p>9. Travelling for the purpose of obtaining Treatment</p> <ul style="list-style-type: none"> • We will not pay a benefit if a trip is made for the purpose of obtaining a diagnosis, medical Treatment, surgery, investigation, palliative care, or any alternative therapy, as well as any directly or indirectly related complication. <p>10. Travelling when Treatment could be expected</p> <ul style="list-style-type: none"> • We will not pay a benefit if any Medical Condition or symptoms for which it is reasonable to believe or expect that Treatment or Hospitalization will be required during Your trip. • We will not pay a benefit if any evident symptoms that would be reasonable to expect You to investigate in the 3 months prior to Your Departure Date on a Covered Trip. <p>11. Medical Emergency occurring outside the Coverage Period</p> <p>We will not pay a benefit if a Medical Emergency that occurs before the Coverage Period begins or after it ends:</p> <ul style="list-style-type: none"> • For an Insured Person 64 years of age and under, this means, for example, that no benefit will be paid with respect to any Medical Emergency if an Insured Person's Medical Emergency occurs after the first 31 days following an Insured Person's Departure Date from their province or territory of residence. • For an Insured Person 65 years of age or older, this means, for example, that no benefit will be paid with respect to any Medical Emergency if an Insured Person's Medical Emergency occurs after the first 4 days following an Insured Person's Departure Date from their province or territory of residence. <p>For clarity, no benefit will be paid with respect to a Medical Emergency that occurs after 11:59 p.m. ET on the last day of the Coverage Period, if You have not purchased top-up coverage. Note: The day of departure counts as a full day for this purpose.</p> <p>12. General</p> <p>As noted above, the benefits payable under the Group Policy will be the actual cost of the covered expense less:</p> <ul style="list-style-type: none"> • the amount reimbursable under GHIP; and • the amount reimbursable through any other insurance or health plan coverage.
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	<p>Physician;</p> <p>e. Alcohol or drug use</p> <ul style="list-style-type: none"> • abuse of medication or alcohol or use of illicit drugs; <p>f. Crime</p> <ul style="list-style-type: none"> • participation in a criminal offence; <p>g. Professional Sports or Racing</p> <ul style="list-style-type: none"> • participation in professional sports or any organized racing or speed contests; <p>h. War</p> <ul style="list-style-type: none"> • any act of war, whether declared or not, hostile or warlike action in time of peace or war, insurrection, rebellion, revolution, civil war or hijacking; <p>i. Commuting</p> <ul style="list-style-type: none"> • any trip that is primarily for the purpose of commuting to or from the Insured Person's usual place of employment; <p>j. Mental Problems</p> <ul style="list-style-type: none"> • any mental, nervous or emotional problems, including any Medical Emergency arising from these problems; <p>k. Hazardous Activities</p> <ul style="list-style-type: none"> • recreational scuba diving (unless the Insured Person holds a basic scuba designation from a certified school or licensing body), mountaineering, bungee-jumping, parachuting, parasailing, cave exploration, hang-gliding, skydiving or any airborne activity in any aircraft other than a passenger aircraft that holds a valid certificate of airworthiness; <p>l. Travel Advisories</p> <ul style="list-style-type: none"> • travel in a country if the Canadian government had issued a travel advisory for that country that was in effect immediately before the Coverage Period began. <p>11. Dependent Child not travelling with You or Your Spouse. No benefit will be payable with respect to a Dependent Child unless he or she is travelling with You or Your Spouse.</p> <p>12. Family members of an Additional Cardholder. No benefit will be payable with respect to a person merely because that person is the Spouse or a Dependent Child of an Additional Cardholder, unless that person is otherwise eligible for insurance under this Certificate.</p>	<p>13. No benefit will be payable in connection with <i>Treatment</i>, services or expenses related to or resulting from:</p> <p>a) Misrepresentation</p> <ul style="list-style-type: none"> • Any <i>Medical Condition</i> for which <i>You</i> or an <i>Insured Person</i> provided <i>Our Administrator</i> or <i>Us</i> with false or inaccurate information regarding <i>Hospitalizations</i>, <i>Treatment</i> or medications. <p>b) Claims related to expectant mother's complications of pregnancy, or delivery</p> <ul style="list-style-type: none"> • claim related to routine pre-natal or post-natal care; or • claim related to pregnancy, delivery or complications of either, arising 9 weeks before the expected date of delivery or any time after delivery; or • child born during the <i>Covered Trip</i>. <p>c) Intentionally self-inflicted injuries</p> <ul style="list-style-type: none"> • intentionally self-inflicted injuries, suicide or attempted suicide, (whether or not the <i>Insured Person</i> is aware of the result of their actions), regardless of the <i>Insured Person's</i> state of mind. <p>d) Non-compliance with prescribed <i>Treatment</i></p> <ul style="list-style-type: none"> • any <i>Medical Condition</i> that is the result of <i>You</i> not following medical <i>Treatment</i> as prescribed to <i>You</i>, including prescribed or over-the-counter medication. <p>e) Abuse of alcohol, drugs or intoxicants</p> <ul style="list-style-type: none"> • Any <i>Medical Condition</i>, including symptoms of withdrawal, arising from, or in any way related to, <i>Your</i> chronic use of alcohol, drugs or other intoxicants whether prior to or during <i>Your</i> trip. • Any <i>Medical Condition</i> arising during <i>Your</i> trip from, or in any way related to, the abuse of alcohol, drugs or other intoxicants. <p>f) Illegal Act</p> <ul style="list-style-type: none"> • Claim that results from or is related to <i>Your</i> involvement in the commission or attempted commission of a criminal offence or illegal act in the country where the claim was incurred, including driving while impaired or over the legal limit. <p>g) Professional Sports or Racing</p> <ul style="list-style-type: none"> • participation in professional sports or any organized racing or speed contests. <p>h) War or civil unrest</p> <ul style="list-style-type: none"> • an act of war, whether declared or undeclared; or • hostile or warlike action in time of peace or war; or • willing participation in a war, riot or civil unrest; or • rebellion; or • revolution; or • insurrection; or • any service in the armed forces while on duty. <p>i) Commuting</p> <ul style="list-style-type: none"> • any trip that is primarily for the purpose of commuting to or from the <i>Insured Person's</i> usual place of employment. <p>j) Sports and High-Risk Activities</p> <ul style="list-style-type: none"> • accident that occurs while <i>You</i> are participating in: <ul style="list-style-type: none"> • any sporting activity for which <i>You</i> are paid; • any sporting event for which the winners are awarded cash prizes; • any extreme sport or activity involving a high level of risk, such as those indicated below, but not limited to: <ul style="list-style-type: none"> - parasailing, hang-gliding and paragliding;
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Benefit	Before	After
		<ul style="list-style-type: none"> - parachuting and sky diving; - bungee jumping; - <i>Mountaineering</i>; - cave exploration; - scuba diving, outside the limits of <i>Your</i> certification; - any airborne activity in any aircraft other than a passenger aircraft that holds a valid certificate of airworthiness; - any competition, motorized speed event or other high-risk activity on land, water or air, including training activities, whether on approved tracks or elsewhere. <p>k) Travel Advisory</p> <ul style="list-style-type: none"> • where an official travel advisory was issued by the Canadian government stating, “Avoid all non-essential travel” or “Avoid all travel” regarding the country, region or city of <i>Your</i> destination, before <i>Your Departure Date</i>; or • if the travel advisory or formal notice stating “Avoid all non-essential travel” or “Avoid all travel” is issued after <i>Your Departure Date</i>, <i>Your</i> coverage under this policy in that specific country, region or area will be limited to a period that is reasonably necessary for <i>You</i> to safely evacuate the country, region or area. <p>To view the travel advisories, visit the Government of Canada Travel site. This exclusion does not apply to claims for a <i>Medical Emergency</i> or a <i>Medical Condition</i> unrelated to the travel advisory.</p> <p>14. Travel against medical advice</p> <ul style="list-style-type: none"> • any claim incurred after a <i>Physician</i> advised <i>You</i> not to travel. <p>15. Coverage and/or payment benefit prohibited by law</p> <ul style="list-style-type: none"> • this coverage shall be null and void and no benefit will be payable where the coverage and/or payment of the benefit is prohibited by Canadian law or by any other applicable national economic or trade sanctions law or regulation. <p>16. Family Members of an <i>Additional Cardholder</i></p> <ul style="list-style-type: none"> • No benefit will be payable with respect to a person merely because that person is the <i>Spouse</i> or a <i>Dependent Child</i> of an <i>Additional Cardholder</i>, unless that person is otherwise eligible for insurance under this <i>Certificate</i>.

Changes to your Certificate of Insurance, as of March 24, 2022

Benefit	Before	After
Travel Medical Insurance	<p>SECTION 8 – WHAT TO DO IN A MEDICAL EMERGENCY When a Medical Emergency occurs, You or if applicable, an Insured Person, must phone Our Administrator immediately, or as soon as is reasonably possible. Otherwise, benefits will be limited as described in section 7 under “Limitations and Exclusions: 1. Failure to Report”. Some expenses will only be covered if Our Administrator approves them in advance. Assistance is available twenty-four hours a day, seven days a week, by calling toll-free 1-866-374-1129 from Canada or the U.S.A., or from other countries by calling collect (416) 977-4425. Our Administrator will verify whether coverage is in effect and, if so, will direct the Insured Person to the nearest appropriate medical facility. Our Administrator will pay, or guarantee payment to, the provider of medical services wherever possible, and manage the Insured Person’s Medical Emergency from the initial report through its conclusion. If a direct guarantee or payment is not possible, the Insured Person may be asked to pay for services. Upon submission of a claim, the Insured Person will be reimbursed for any such Eligible Medical Emergency Expenses so paid, as described under this Certificate. Note: All payments and payment guarantees are subject to the terms and conditions of the Certificate, including limitations and exclusions.</p>	<p>Section 5 – Description of Insurance Coverage</p> <p>What to do in a Medical Emergency In a <i>Medical Emergency</i>, You or someone on your behalf must call <i>Our Administrator</i> immediately, or as soon as reasonably possible. If not, benefits will be limited as described below in Section 6 – “Limitations and Exclusions”, under “Failure to Report”. Some expenses will only be covered if <i>Our Administrator</i> approves them in advance. You can get help 24 hours a day, 7 days a week by contacting <i>Our Administrator</i>: Call 1-866-374-1129 (toll-free) from Canada or the U.S., or +1-416-977-4425 (collect) from other countries. <i>Our Administrator</i> will verify whether coverage is in effect and, if so, will direct You to the nearest appropriate medical facility. <i>Our Administrator</i> will arrange for direct payment to the medical services provider wherever possible. If a direct payment cannot be arranged, You may be asked to pay for services and then submit a claim for reimbursement of eligible expenses. NOTE: All payments and payment guarantees are subject to the terms, conditions, limitations and exclusions of this <i>Certificate</i>.</p>

<p>Travel Medical Insurance</p>	<p>SECTION 9 – HOW TO MAKE A CLAIM A <i>Medical Emergency</i> should always be reported immediately, as described in section 8, or benefits will be limited.</p> <p>Failure to Report a Claim Immediately If, without contacting <i>Our Administrator</i> for assistance and claim management, an <i>Insured Person</i> incurs <i>Eligible Medical Emergency Expenses</i>, then he or she must first submit receipts and other proof to:</p> <ul style="list-style-type: none"> • GHIP; • then to any group or individual health plans and/or insurers. <p>Any <i>Eligible Medical Emergency Expenses</i> that are not covered by such GHIP, health plans or insurance should then be submitted to <i>Our Administrator</i> with proof of claim, receipts and payment statements. In this case, claims forms can be obtained from <i>Our Administrator's</i> Customer Service representatives at the number set out in section 10. The <i>Insured Person</i> will also be required to provide evidence of his or her actual date of departure from his or her province or territory of residence. Reporting a Claim Immediately If <i>Hospital</i> or other medical charges have been guaranteed or paid by <i>Our Administrator</i> on behalf of an <i>Insured Person</i> then <i>You</i> and, if applicable, the <i>Insured Person</i> must sign an authorization form allowing <i>Our Administrator</i> to recover these charges: • from the <i>Insured Person's</i> GHIP; • from any health plan or other insurance; • through subrogation rights against any responsible third party. If <i>Our Administrator</i> has paid for <i>Eligible Medical Emergency Expenses</i> covered under other insurance or another plan, <i>You</i> and, if applicable, the <i>Insured Person</i> must assist <i>Our Administrator</i> in obtaining reimbursement, where necessary. The <i>Insured Person</i> will also be required to provide evidence of his or her actual date of departure from his or her province or territory of residence. Note: If an advance payment is made for expenses and it is later discovered that they <i>Were</i> not covered under this <i>Certificate</i>, then <i>You</i> and/or the <i>Insured Person</i> must reimburse <i>Us</i>.</p>	<p>Section 8 – How to Submit a Claim</p> <p>Who to Contact to Submit a Claim: A <i>Medical Emergency</i> should always be reported immediately, or benefits will be limited. <i>You</i> can get help 24 hours a day, 7 days a week by contacting <i>Our Administrator</i> at 1-866-374-1129 (toll-free) from Canada or the U.S., or +1-416-977-4425 (collect) from other countries.</p> <p>Complete the Required Form</p> <p>a) Request the Form: To request a claim form, call <i>Our Administrator</i> at 1-866-374-1129 (toll-free) from 8 a.m. to 8 p.m. ET, Monday to Friday.</p> <p>b) Time limit from date of event: If <i>You</i> are making a claim, <i>You</i> must send <i>Our Administrator</i> the appropriate claim forms, together with written proof of loss (e.g., original invoices and tickets, medical and/or death certificates) as soon as possible. In every case, <i>You</i> must submit <i>Your</i> completed claim form with required documentation within 1 year from the date of the accident or the date the claim arises. Failure to provide the applicable documentation may invalidate <i>Your</i> claim.</p> <p>Provide the Information Requested To make a <i>Medical Emergency</i> claim, as part of the requirements above, under "Time limit from date of event," <i>We</i> will need documentation to substantiate the claim, including but not limited to the following:</p> <ul style="list-style-type: none"> • completed claim form; and • proof of payment by <i>You</i> and by any other benefit plan; and • the original itemized receipts for all bills and invoices; and • proof of travel (including departure and return dates); and • medical records, including complete diagnosis by the attending <i>Physician</i> or documentation by the <i>Hospital</i>, which must support that the <i>Treatment</i> was medically necessary; and • proof of the accident if <i>You</i> are submitting a claim for dental expenses resulting from a <i>Medical Emergency</i>; and • <i>Your</i> historical medical records (if <i>We</i> determine applicable). <p><u>If You Do Not Report the Claim Immediately</u> In a <i>Medical Emergency</i>, <i>You</i> must call <i>Our Administrator</i> immediately, or as soon as is reasonably possible. If not, benefits will be limited as described in Section 6 – "Limitations and Exclusions". If an <i>Insured Person</i> incurs <i>Eligible Medical Emergency</i> expenses without first contacting <i>Our Administrator</i> for assistance and claim management, they must first submit receipts and other proof to:</p> <ul style="list-style-type: none"> • GHIP; and • then to any group or individual health plan(s) and/or insurer(s). <p><i>Eligible Medical Emergency</i> expenses not covered by a GHIP or other plan or insurance must be submitted to <i>Our Administrator</i> with proof of claim, receipts and payment statements.</p> <p>The <i>Insured Person</i> must also provide proof of the actual <i>Departure Date</i> from their province or territory of residence.</p> <p>What Claimant Can Expect from Insurer Once <i>We</i> have approved the claim, <i>We</i> will notify <i>You</i> and payment will be after receipt of the required claim forms, documentation and written proof of loss. If the claim has been denied, <i>We</i> will inform <i>You</i> of the claim denial reasons after receipt of the required claim forms and written proof of loss.</p> <p><u>If You Report the Claim Immediately</u></p>
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Changes to your Certificate of Insurance, as of March 24, 2022

Benefit	Before	After
		<p>If <i>Our Administrator</i> guarantees or pays eligible expenses on behalf of an <i>Insured Person</i>, then <i>You</i> and, if applicable, the <i>Insured Person</i> must sign an authorization form allowing <i>Our Administrator</i> to recover those expenses:</p> <ul style="list-style-type: none"> • from the <i>Insured Person's GHIP</i>; and • from any health plan or other insurance; and • through rights <i>You</i> may have against other insurers or other parties (see Section 10 – “General Conditions”, under “Right of Subrogation”). <p>If <i>Our Administrator</i> pays eligible expenses that are covered under other insurance or another plan, <i>You</i>, and if applicable, the <i>Insured Person</i> must help <i>Our Administrator</i> to seek reimbursement as required. The <i>Insured Person</i> must also provide evidence of the actual <i>Departure Date</i> from their province or territory of residence. If requested, an <i>Insured Person</i> must confirm any return dates to their province or territory of residence, including any return dates related to an interruption in a <i>Covered Trip</i>. Note: If <i>Our Administrator</i> makes an advance payment for expenses that are later discovered to be ineligible under this <i>Certificate</i>, the <i>Insured Person</i> must reimburse <i>Us</i>.</p>
<p>Travel Medical Insurance</p>	<p>SECTION 10 – HOW TO CONTACT OUR ADMINISTRATOR 24 Hour Emergency Assistance Number To report a Medical Emergency, <i>You</i> or, if applicable, the <i>Insured Person</i> can call <i>Our Administrator</i> twenty-four hours a day, seven days a Week at: From the U.S.A. or Canada 1-866-374-1129 From elsewhere, call collect (416) 977-4425 29 Customer Service: Phone number To enquire about <i>Your</i> benefits under this <i>Certificate</i> or to check on the status of an existing claim, <i>You</i> can call <i>Our Administrator</i> at: Toll-free at 1-866-374-1129 or at (416) 977-4425 Monday – Saturday 8 a.m. – 8 p.m. Eastern Time In a non-emergency situation, <i>You</i> can also call this number to obtain claims forms. Customer Service: Mailing Address <i>You</i> can mail <i>Your</i> request to: Allianz Global Assistance Re: TD Credit Card – Travel Medical Insurance P.O. Box 277, Waterloo, Ontario, N2J 4A4 Fax: (519) 742-9471.</p>	<p>Section 9 – How To Contact Our Administrator</p> <p>1. 24-Hour Emergency Assistance Number To report a <i>Medical Emergency</i> or apply for a top-up or extension for a <i>Covered Trip</i>, contact <i>Our Administrator</i>, 24 hours a day, 7 days a week, at 1-866-374-1129 (toll-free) from Canada or the U.S., or +1-416-977-4425 (collect) from other countries.</p> <p>2. Customer Service Re: TD Travel Insurance c/o Global Excel Management Inc. 73 Queen Street, Sherbrooke, Quebec J1M 0C9 Fax: +1-819-569-2814 To request a claim form or for claims support, call <i>Our Administrator</i> at 1-866-374-1129 (toll-free) from 8 a.m. to 8 p.m. ET, Monday to Friday.</p>

<p>Travel Medical Insurance</p>	<p>SECTION 11 – GENERAL CONDITIONS Unless this <i>Certificate</i> or the Group Policy states otherwise, the following conditions apply to <i>Your</i> coverage: Proof of Loss The appropriate claims forms together with written proof of loss must be furnished as soon as reasonably possible, but in all events within one (1) year from the date on which the loss occurred. Review and Medical Examination When a claim is being processed, <i>We</i> will have the right and the opportunity, at <i>Our</i> own expense, to review all medical records related to the claim and to examine the <i>Insured Person</i> medically when and as often as may be reasonably required. Subrogation There may be circumstances where another person or entity should have paid <i>You</i> for a loss but instead <i>We</i> paid <i>You</i> for the loss. If this occurs, <i>You</i> agree to co-operate with <i>Us</i> so <i>We</i> may demand payment from the person or entity who should have paid <i>You</i> for the loss. This may include: • transferring to <i>Us</i> the debt or obligation owing to <i>You</i> from the other person or entity; • permitting <i>Us</i> to bring a lawsuit in <i>Your</i> name; • if <i>You</i> receive funds from the other person or entity, <i>You</i> will hold it in trust for <i>Us</i>; • acting so as not to prejudice any of <i>Our</i> rights to collect payment from the other person or entity. <i>We</i> will pay the costs for the actions <i>We</i> take. Other Insurance All of <i>Our</i> policies are excess insurance, meaning that any other sources of recovery <i>You</i> have will pay first, and this insurance policy will be the last to pay. The total benefits payable under all <i>Your</i> insurance, including this <i>Certificate</i>, cannot be more than the actual expenses for a claim. If an <i>Insured Person</i> is also insured under any other insurance <i>Certificate</i> or policy, <i>We</i> will coordinate payment of benefits with the other insurer. In no case will <i>We</i> seek to recover against employment related plans if the lifetime maximum for all in-country and out-of-country benefits is \$50,000 or less. If the lifetime maximum for all in-country and out-of-country benefits is over \$50,000, <i>We</i> will coordinate benefits only above this amount. 30 Legal Action Limitation Period Every action or proceeding against the insurer for the recovery of insurance money payable under the contract is absolutely barred unless commenced within the time set out in the Insurance Act (for actions or proceedings governed by the laws of Alberta or British Columbia), The Insurance Act (for actions or proceedings governed by the laws of Manitoba), the Limitations Act, 2002 (for actions or proceedings governed by the laws of Ontario), the Civil Code of Quebec (for actions or proceedings governed by the laws of Quebec), or other applicable legislation. False Claim If <i>You</i> or an</p>	<p>Section 10 – General Conditions Unless this <i>Certificate</i> or the Group Policy states otherwise, the following conditions apply to <i>Your</i> coverage: Access to Medical Care <i>We</i> and/or <i>Our Administrator</i> will assist <i>You</i> to access care whenever possible, however will not be responsible for the availability, quality or results of any medical <i>Treatment</i> or transport, or for the failure of any <i>Insured Person</i> to obtain medical <i>Treatment</i>. Benefit Payments This <i>Certificate</i> contains provisions removing or restricting the right of the <i>Insured Person</i> to designate persons to whom or for whose benefit money is to be payable. This means that under the Group Policy, neither <i>You</i> nor any <i>Insured Person</i> has the right to choose a beneficiary who will receive any benefits payable under this <i>Certificate</i>. Benefits are payable to <i>You</i> or, on <i>Your</i> behalf, to <i>Your</i> medical service provider. Coordination of Benefits with other insurance • All of <i>Our</i> coverages are excess insurance, meaning that any other sources of recovery <i>You</i> have will pay first, and this insurance coverage will be the last to pay. The total benefits payable under all <i>Your</i> insurance, including this <i>Certificate</i>, cannot be more than the actual expenses for a claim. If an <i>Insured Person</i> is also insured under any other insurance certificate or policy, <i>We</i> will coordinate payment of benefits with the other insurer. • In no case will <i>We</i> seek to recover against employment-related plans if the lifetime maximum for all in-country and out-of-country benefits is \$50,000 or less. If the lifetime maximum for all in-country and out-of-country benefits is over \$50,000, <i>We</i> will coordinate benefits only above this amount. Currency All amounts are shown in Canadian currency. False Claim If <i>You</i> or an <i>Insured Person</i> make a claim knowing it to be false or fraudulent in any respect, neither <i>You</i> nor the <i>Insured Person</i> will be entitled to the benefits of this coverage, nor to the payment of any claim under the Group Policy. Group Policy All benefits under this <i>Certificate</i> are subject in every respect to the <i>Group Policy</i>, which alone constitutes the agreement under which benefits will be provided. The principal provisions of the <i>Group Policy</i> affecting <i>Insured Persons</i> are summarized in this <i>Certificate</i>. The <i>Group Policy</i> is on file at the office of the Policyholder and upon request, <i>You</i> are entitled to receive and examine a copy of the <i>Group Policy</i>. Legal Action Limitation Period Every action or proceeding against the Insurer for the recovery of insurance money payable under the contract is absolutely barred unless commenced within the time set out in the <i>Insurance Act</i> (for actions or proceedings governed by the laws of Alberta or British Columbia), The <i>Insurance Act</i> (for actions or proceedings governed by the laws of Manitoba), the <i>Limitations Act</i>, 2002 (for actions or proceedings governed by the laws of Ontario), or other applicable legislation. For actions or proceedings governed by the laws of Quebec, the prescriptive period is set out in the <i>Civil Code of Quebec</i>. Proof of Loss The appropriate claims forms together with</p>
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Changes to your Certificate of Insurance, as of March 24, 2022

Benefit	Before	After
	<p><i>Insured Person</i> make a claim knowing it to be false or fraudulent in any respect, neither <i>You</i> nor the <i>Insured Person</i> will be entitled to the benefits of this coverage, nor to the payment of any claim under the Group Policy. Currency All amounts are shown in Canadian currency. Access to Medical Care TD Life, the <i>Bank</i>, <i>Our Administrator</i> and their affiliates are not responsible for the availability, quality or results of any medical <i>Treatment</i> or transport, or for the failure of any <i>Insured Person</i> to obtain medical <i>Treatment</i>. Group Policy All benefits under this <i>Certificate</i> are subject in every respect to the Group Policy which alone constitutes the agreement under which benefits will be provided. This Group Policy is issued to the <i>Bank</i>. The principal provisions of the Group Policy affecting <i>Insured Persons</i> are summarized in this <i>Certificate</i>. The Group Policy is on file at the office of the <i>Bank</i>.</p>	<p>written proof of loss must be furnished as soon as reasonably possible, but in all events within 1 year from the date on which the loss occurred.</p> <p>Relationship between Us and the Group Policyholder TD Life Insurance Company is affiliated with The Toronto-Dominion Bank (“TD Bank”).</p> <p>Review and Medical Examination When a claim is being processed, <i>We</i> will have the right and the opportunity, at <i>Our</i> own expense, to review all medical records related to the claim and to examine the <i>Insured Person</i> medically when and as often as may be reasonably required.</p> <p>Right of Subrogation There may be circumstances where another person or entity should have paid <i>You</i> for a loss but instead <i>We</i> paid <i>You</i> for the loss. If this occurs, <i>You</i> agree to cooperate with <i>Us</i> so <i>We</i> may demand payment from the person or entity who should have paid <i>You</i> for the loss. This may include:</p> <ul style="list-style-type: none"> • transferring to <i>Us</i> the debt or obligation owing to <i>You</i> from the other person or entity; • permitting <i>Us</i> to bring a lawsuit in <i>Your</i> name; • if <i>You</i> receive funds from the other person or entity, <i>You</i> will hold it in trust for <i>Us</i>; • acting so as not to prejudice any of <i>Our</i> rights to collect payment from the other person or entity. <p><i>We</i> will pay the costs for the actions <i>We</i> take.</p>
Trip Cancellation / Trip Interruption Insurance	<p>Coverage under this <i>Certificate</i> is provided by: TD Life Insurance Company and TD Home and Auto Insurance Company (Insurer) 320 Front Street West, 3rd Floor, Toronto, ON M5V 3B6</p>	<p>Coverage under this Certificate is provided by: TD Life Insurance Company and TD Home and Auto Insurance Company (“Insurer”) P.O. Box 1, TD Centre, Toronto, ON M5K 1A2</p>
Trip Cancellation / Trip Interruption Insurance	<p>Administration services are provided by: Allianz Global Assistance (<i>Administrator</i>) P.O. Box 277, Waterloo, ON N2J 4A4 Phone: 1-866-374-1129 or (416) 977-4425</p>	<p>Claims administration and adjudication services are provided by: Global Excel Management Inc. (“Administrator”) 73 Queen Street, Sherbrooke, QC J1M 0C9 Phone: 1-866-374-1129 or +1-416-977-4425</p>

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Benefit	Before	After
<p>Trip Cancellation / Trip Interruption Insurance</p>	<p><i>Certificate of Insurance</i> This <i>Certificate</i> applies to the TD Aeroplan Visa Infinite Privilege Card which will be referred to as a “TD Credit Card” throughout the <i>Certificate</i>. TD Life Insurance Company (“TD Life”) provides the insurance for the Medical Covered Causes for Cancellation and the Medical Covered Causes for Interruption under this <i>Certificate</i> under Group Policy No. TGV003. TD Home and Auto Insurance Company (“TDH&A”) provides the insurance for the Non-Medical Covered Causes for Cancellation and the Non-Medical Covered Causes for Interruption under this <i>Certificate</i> under Group Policy TGV006. Together, these policies are referred to as the “Group Policies”. <i>Our Administrator</i> administers the insurance on behalf of TD Life and TDH&A and provides claims payment and administrative services under the Group Policies.</p> <p>This <i>Certificate</i> contains important information. Please read it carefully and take it with <i>You</i> on <i>Your</i> trip. This <i>Certificate</i> contains a clause which may limit the amount payable.</p>	<p>Section 1 – Introduction Certificate of Insurance Claims administration and adjudication services are provided by Global Excel Management Inc. This <i>Certificate</i> applies to the TD Aeroplan Visa Infinite Privilege Card, which will be referred to as a “TD Credit Card” throughout the <i>Certificate</i>. TD Life Insurance Company (“TD Life”) provides the insurance for the Medical Covered Causes for Cancellation and the Medical Covered Causes for Interruption under this <i>Certificate</i> under Group Policy No. TGV003. TD Home and Auto Insurance Company (“TDH&A”) provides the insurance for the Non-Medical Covered Causes for Cancellation and the Non-Medical Covered Causes for Interruption under this <i>Certificate</i> under Group Policy TGV006. Together, these policies are referred to as the “Group Policies”. This <i>Certificate</i> contains important information. Please read it carefully and take it with <i>You</i> on <i>Your</i> trip.</p>
<p>Trip Cancellation / Trip Interruption Insurance</p>	<p>Important Notes: Pre-Existing Conditions: A <i>Pre-Existing Condition</i> exclusion applies to the Trip Cancellation and Trip Interruption benefits. Please see Limitations and Exclusions under sections 6 through 8 for details. If <i>You</i> have any questions regarding Pre-Existing Conditions and/or want to confirm coverage, please contact <i>Our Administrator</i> at 1-866-374-1129 or at (416) 977-4425. If <i>You</i> need to cancel or interrupt a trip: If a Covered Cause for Cancellation or Interruption occurs, <i>You</i> or, if applicable, an Insured Person, must phone the <i>Administrator</i> immediately. Please see section 11 for contact information. This policy contains a provision removing or restricting the right of the group life insured to designate persons to whom or for whose benefit insurance money is to be payable.</p>	<p>IMPORTANT NOTICE – READ CAREFULLY BEFORE YOU TRAVEL We want <i>You</i> to understand (and it is in <i>Your</i> best interest to know) what <i>Your</i> coverage includes, what it excludes, and what is limited (payable but with limits). Please take time to read through <i>Your Certificate</i> before <i>You</i> travel. Italicized and capitalized terms are defined in <i>Your Certificate</i>.</p> <ul style="list-style-type: none"> • Travel insurance covers claims arising from sudden and unexpected situations (e.g., accidents and emergencies). • To qualify for this insurance, <i>You</i> must meet all the eligibility requirements. • This insurance contains limitations and exclusions (e.g., <i>Medical Conditions</i> that are not <i>Stable</i>, pregnancy, child born on trip, excessive use of alcohol, high-risk activities, etc.). • This insurance may not cover claims related to <i>Pre-Existing Medical Conditions</i> whether disclosed or not. • Contact <i>Our Administrator</i> at 1-866-374-1129 (toll-free) from Canada or the U.S., or +1-416-977-4425 (collect) from other countries before <i>You</i> need to cancel or interrupt <i>Your Covered Trip</i> or <i>Your</i> benefits may be limited or denied. • In the event of a claim <i>Your</i> prior medical history may be reviewed. <p>IT IS YOUR RESPONSIBILITY TO UNDERSTAND YOUR COVERAGE. Please read <i>Your Certificate</i> for specific coverage, details, limitations and exclusions.</p>

Changes to your Certificate of Insurance, as of March 24, 2022

Benefit	Before	After
Trip Cancellation / Trip Interruption Insurance	<p>SECTION 1 – SUMMARY OF BENEFITS</p> <p><u>Benefits</u> Trip Cancellation Insurance</p> <p><u>Maximum Benefit Payable</u> \$1,500 per <i>Insured Person</i> per <i>Covered Trip</i></p> <p>\$5,000 total per <i>Covered Trip</i> for all <i>Insured Persons</i> on the same <i>Covered Trip</i></p> <p><u>Benefits</u> Trip Interruption Insurance</p> <p><u>Maximum Benefit Payable</u> \$5,000 per <i>Insured Person</i> per <i>Covered Trip</i></p> <p>\$25,000 total per <i>Covered Trip</i> for all <i>Insured Persons</i> on the same <i>Covered Trip</i></p> <p>Note: If the value of an <i>Insured Person's Covered Trip</i> exceeds the amounts listed above, You may wish to speak to our travel agent or other travel supplier for excess coverage.</p>	<p>Section 2 – Summary of Benefits</p> <p>No change.</p>

<p>Trip Cancellation / Trip Interruption Insurance</p>	<p>SECTION 2 – DEFINITIONS</p> <p>In this <i>Certificate</i>, the following words and phrases shown in italics have the meanings shown below. As <i>You</i> read through the <i>Certificate</i>, <i>You</i> may need to refer to this section to ensure <i>You</i> have a full understanding of <i>Your</i> coverage, limitations and exclusions:</p> <p><i>Account</i> means the Primary Cardholder's TD Credit Card <i>Account</i> that the <i>Bank</i> maintains.</p> <p><i>Account Holder</i> means the person who was issued a TD Credit Card, whose name is on the <i>Account</i> and who is a resident of Canada. The <i>Account Holder</i> may be referred to herein Using "You" and "Your".</p> <p><i>Additional Cardholder</i> means a person to whom a TD Credit Card has been issued at the authorization of the Primary Cardholder.</p> <p><i>Administrator</i> means the service provider arranged by TD Life and TDH&A to provide claims payment and administrative services under the Group Policies.</p> <p><i>Aeroplan Points</i> means the points awarded through the Aeroplan program which can be redeemed for rewards. <i>Aeroplan Points</i> have no monetary value.</p> <p><i>Bank</i> means The Toronto-Dominion Bank.</p> <p><i>Certificate</i> means this <i>Certificate</i> of insurance.</p> <p><i>Common Carrier</i> means any land, air or water conveyance which is licensed to carry passengers without discrimination and for hire, excluding <i>courtesy</i> transportation provided without a specific charge.</p> <p><i>Coverage Period</i> means the period of time during which a covered event must occur for a benefit to be payable. <i>Coverage Period</i> means the Trip Cancellation <i>Coverage Period</i> or the Trip Interruption Coverage Period, as applicable. These terms are defined in section 5.</p> <p><i>Covered Trip</i> means a trip:</p> <ul style="list-style-type: none"> • made by an <i>Insured Person</i> outside the <i>Insured Person's</i> province or territory of residence; • that does not extend to or past: <ul style="list-style-type: none"> • the date the <i>Insured Person</i> no longer meets the eligibility requirements set out in section 3; • the date coverage terminates as described in section 4; • that was booked or reserved prior to departure from the <i>Insured Person's</i> province or territory of residence; and • for which at least 75% of the cost has been charged: <ul style="list-style-type: none"> • to <i>Your Account</i> and/or • Using <i>Your Aeroplan Points</i>. <p><i>Dependent Children</i> means <i>Your</i> natural, adopted, or step-children who are:</p> <ul style="list-style-type: none"> • unmarried; • dependent on <i>You</i> for financial maintenance and support; and • under 22 years of age; or • under 26 years of age and attending an institution of higher learning, full-time, in Canada; or • mentally or physically handicapped. <p>Note: A Dependent Child does not</p>	<p>Section 4 – Definitions</p> <p>In this <i>Certificate</i>, the following words and phrases shown in italics have the meanings shown below. As <i>You</i> read through the <i>Certificate</i>, <i>You</i> may need to refer to this Section to ensure <i>You</i> have a full understanding of <i>Your</i> coverage, limitations and exclusions.</p> <p>Account means the <i>Primary Cardholder's</i> TD Credit Card Account that the <i>Bank</i> maintains.</p> <p>Account Holder means the person who was issued a TD Credit Card, whose name is on the <i>Account</i> and who is a resident of Canada.</p> <p>Additional Cardholder means a person to whom a TD Credit Card has been issued at the authorization of the <i>Primary Cardholder</i>.</p> <p>Aeroplan Points mean the points awarded through the Aeroplan program which can be redeemed for rewards. <i>Aeroplan Points</i> have no monetary value.</p> <p>Bank means The Toronto-Dominion Bank.</p> <p>Certificate means this Certificate of Insurance.</p> <p>Common Carrier means any land, air or water conveyance (e.g., passenger plane, ferry, cruise ship, bus, limousine, taxi or train), which is licensed to carry passengers without discrimination and for hire, excluding <i>courtesy</i> transportation provided without a specific charge.</p> <p>Coverage Period means the period of time during which a covered event must occur for a benefit to be payable. Furthermore, it means the Trip Cancellation Coverage Period or the Trip Interruption Coverage Period, as applicable and as defined in Section 7 – "How to Become Insured" of the <i>Certificate</i>.</p> <p>Covered Trip means a trip:</p> <ul style="list-style-type: none"> • made by an <i>Insured Person</i> outside the <i>Insured Person's</i> province or territory of residence; • that does not extend to or past: <ul style="list-style-type: none"> • the date the <i>Insured Person</i> no longer meets the eligibility requirements; or • the date coverage terminates • that was booked or reserved prior to <i>Departure Date</i> from the <i>Insured Person's</i> province or territory of residence; and • for which at least 75% of the cost of the <i>Covered Trip</i> has been charged to <i>Your Account</i> and/or using <i>Your Aeroplan Points</i>. <p>Departure Date means the date the <i>Insured Person</i> left their province/territory of residence.</p> <p>Dependent Children mean <i>Your</i> natural, adopted, or stepchildren who are:</p> <ul style="list-style-type: none"> • unmarried; and • dependent on <i>You</i> for financial maintenance and support; and <ul style="list-style-type: none"> • under 22 years of age; or • under 26 years of age and attending an institution of higher learning, full time, in Canada; or • mentally or physically handicapped. <p>Note: A <i>Dependent Child</i> does not include a child born while the child's mother is outside her province or territory of residence during the <i>Covered Trip</i>. The child will not be insured with respect to that trip.</p> <p>Effective Date means the date <i>Your Certificate</i> takes effect with respect to <i>You</i>, which is the date on which an <i>Account</i> is opened by the <i>Bank</i> for <i>You</i> and <i>You</i> meet the eligibility requirements. <i>Covered Trips</i> booked on or after the <i>Effective Date</i> shall be eligible for coverage.</p> <p>Good Standing means an <i>Account</i> is in <i>Good Standing</i> if:</p> <ul style="list-style-type: none"> • the <i>Primary Cardholder</i> has applied for the <i>Account</i>;
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	<p>include a child born while the child's mother is outside her province or territory of residence during the Covered Trip. The child will not be insured with respect to that trip.</p> <p><i>Effective Date</i> means the date this <i>Certificate</i> takes effect with respect to <i>You</i>, and is the later of March 17, 2008, and the date on which an <i>Account</i> is opened by the <i>Bank</i> for <i>You</i> and <i>You</i> meet the eligibility requirements set out in section 3</p> <p>with respect to this <i>Account</i>. Only Covered Trips booked on or after the <i>Effective Date</i> shall be eligible for coverage.</p> <p><i>Good Standing</i>: An <i>Account</i> is in <i>Good Standing</i> if:</p> <ul style="list-style-type: none"> • the <i>Primary Cardholder</i> has applied for the <i>Account</i>, • the <i>Bank</i> has approved and opened the <i>Account</i>, • the <i>Primary Cardholder</i> has not advised the <i>Bank</i> to close the <i>Account</i>, and • the <i>Bank</i> has not suspended or revoked credit privileges or otherwise closed the <i>Account</i>. <p><i>Hospital</i> means an institution that is accredited and licensed by the appropriate authority as a <i>Hospital</i> to Treat patients on an in-patient, out-patient and emergency basis; or the nearest medical facility that has been approved in advance by <i>Our Administrator</i>.</p> <p>Exceptions: <i>Hospital</i> does not include chronic care, convalescent, rehabilitation or nursing home facilities.</p> <p><i>Immediate Family Member</i> means an <i>Insured Person's Spouse</i>, parents, step parent, grandparents, natural or adopted children, step children or legal ward, step sisters, step brothers, grandchildren, brothers, brothers-in-law, sisters, sisters-in-law, aunts, uncles, nieces or nephews, sons-in-law or daughters-in-law, and the <i>Insured Person's Spouse's</i> parents, grandparents, brothers, brothers-in-law, sisters, sisters-in-law and children.</p> <p><i>Insured Person</i> means a person who is eligible to be insured under this <i>Certificate</i> as described in section 3.</p> <p><i>Medical Condition</i> means an irregularity in the health of an <i>Insured Person</i> which required or requires medical advice, consultation, investigation, <i>Treatment</i>, care, service or diagnosis by a <i>Physician</i>.</p> <p><i>Physician</i> means a <i>Physician</i> or surgeon who is registered or licensed to practice medicine in the jurisdiction where he or she provides medical advice or <i>Treatment</i> and who is not related by blood or marriage to any <i>Insured Person</i> under this <i>Certificate</i>.</p> <p><i>Pre-Existing Condition</i> means a Medical Condition:</p> <ul style="list-style-type: none"> • for which symptoms appeared in the <i>Pre-Existing Condition</i> Period; • that was investigated, diagnosed or <i>Treated</i> during the <i>Pre-Existing Condition</i> Period where <i>Treatment</i> includes medication; or • for which further investigation was recommended or prescribed, or for 	<ul style="list-style-type: none"> • the <i>Bank</i> has approved and opened the <i>Account</i>; • the <i>Primary Cardholder</i> has not advised the <i>Bank</i> to close the <i>Account</i>; and • the <i>Bank</i> has not suspended or revoked credit privileges or otherwise closed the <i>Account</i>. <p>Hospital means an institution that is licensed as an accredited hospital that is staffed and operated for the care and <i>Treatment</i> of in-patients and out-patients. <i>Treatment</i> must be supervised by <i>Physicians</i> and there must be registered nurses on duty 24 hours a day. Diagnostic and surgical capabilities must also exist on the premises or in facilities controlled by the establishment.</p> <p>Note: A <i>Hospital</i> is not an establishment used mainly as a clinic, extended or palliative care facility, rehabilitation facility, addiction treatment centre, convalescent, rest or nursing home, home for the aged or health spa.</p> <p>Hospitalized or Hospitalization means to be an in-patient in a <i>Hospital</i>.</p> <p>Immediate Family Member means an <i>Insured Person's</i>:</p> <ul style="list-style-type: none"> • <i>Spouse</i>, parents, stepparent, grandparents, natural or adopted children, stepchildren or legal ward, grandchildren, brothers, sisters, stepbrothers, stepsisters, aunts, uncles, nieces, nephews; and • mother-in-law, father-in-law, brothers-in-law, sisters-in-law, sons-in-law, daughters-in-law; and • the <i>Insured Person's Spouse's</i> grandparents, brothers-in-law and sisters-in-law. <p>Insured Person means a person who is eligible to be insured under this <i>Certificate</i>.</p> <p>Medical Condition means any disease, illness, or injury (including symptoms of undiagnosed conditions; complication of pregnancy within the first 31 weeks of pregnancy; a mental or emotional disorder, including acute psychosis that requires admission to a <i>Hospital</i>).</p> <p>Mountaineering means the ascent or descent of a mountain requiring the use of specialized equipment, including crampons, pick-axes, anchors, bolts, carabineers and lead-rope or top-rope anchoring equipment.</p> <p>Physician means a person who is not <i>You</i> or <i>Your Immediate Family Member</i> or <i>Your Travelling Companion</i>, licensed in the jurisdiction where the services are provided, to prescribe and administer medical treatment.</p> <p>Pre-Existing Medical Condition means any <i>Medical Condition</i> that exists in the <i>Pre-Existing Medical Condition</i> Period.</p> <p>Pre-Existing Medical Condition Period with respect to any benefit under this <i>Certificate</i> is as follows:</p> <ul style="list-style-type: none"> • <i>Insured Persons</i> 64 years of age and under – 90 days immediately before the beginning of the <i>Coverage Period</i>; and • <i>Insured Persons</i> 65 years of age or older – 180 days immediately before the beginning of the <i>Coverage Period</i>. <p>Primary Cardholder means a person who applied for a TD Credit Card, whose name is on the <i>Account</i> and to whom a TD Credit Card has been issued. A <i>Primary Cardholder</i> does not include an <i>Additional Cardholder</i>.</p> <p>Spouse means:</p> <ul style="list-style-type: none"> • the person who the <i>Insured Person</i> is legally married to; or • the person the <i>Insured Person</i> has lived with for at least 1 continuous year in the same household and publicly refers to as their partner
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Benefit	Before	After
	<p>which a change in <i>Treatment</i> was recommended (including a change in medication or dosage) during the <i>Pre-Existing Condition</i> Period.</p> <p><i>Pre-Existing Condition</i> Period with respect to any benefit under this <i>Certificate</i> is as follows:</p> <ul style="list-style-type: none"> • <i>Insured Persons</i> under 65 years of age – 90 days immediately before the beginning of the Coverage Period; and • <i>Insured Persons</i> 65 years of age or older – 180 days immediately before the beginning of the Coverage Period. <p><i>Primary Cardholder</i> means a person who applied for a TD Credit Card, whose name is on the <i>Account</i> and to whom a TD Credit Card has been issued. A <i>Primary Cardholder</i> does not include an Additional Cardholder.</p> <p><i>Spouse</i> means:</p> <ul style="list-style-type: none"> • the <i>Insured Person's</i> legal husband or wife; and • the person who the <i>Insured Person</i> has lived with for at least one year and publicly represented as his or her domestic partner. <p><i>Stable</i> means any <i>Medical Condition</i> or related condition (whether or not the diagnosis has been determined) for which there have been:</p> <ul style="list-style-type: none"> • no new or change in medication or dosage; • no new or change in <i>Treatment</i>; • no new or increase in frequency or severity of symptoms; • no referral or recommendation to see a specialty clinic or specialist; • no pending test results or testing; or • no pending surgery or other <i>Treatment</i>. <p><i>Travelling Companion</i> means someone who shares trip arrangements and accommodations with <i>You</i>.</p> <p>Exceptions: No more than three (3) individuals (including <i>You</i>) will be considered travel companions on any one trip.</p> <p><i>Treated</i> or <i>Treatment</i> means any medical, therapeutic or diagnostic procedure prescribed, performed or recommended by a <i>Physician</i>, including but not limited to prescribed or unprescribed medication, investigative testing and surgery. The term "<i>Treatment</i>" does not include the unaltered <i>Use</i> of prescribed medication for a <i>Medical Condition</i> which is <i>Stable</i>.</p> <p><i>We</i>, <i>Us</i> and <i>Our</i> mean TD Life Insurance Company with respect to the Medical Covered Causes for Cancellation and Medical Covered Causes for Interruption. <i>We</i>, <i>Us</i> and <i>Our</i> mean TD Home and Auto Insurance Company with respect to the Non-Medical Covered Causes for Cancellation and Non-Medical Covered Causes for Interruption. These terms are defined in sections 6 and 7.</p> <p><i>You</i> and <i>Your</i> means the Primary Cardholder</p>	<p>Stable: a <i>Medical Condition</i>, is considered <i>Stable</i> when all of the following statements are true:</p> <ol style="list-style-type: none"> 1. there has not been any new <i>Treatment</i> prescribed or recommended, or change(s) to existing <i>Treatment</i> (including a stoppage in <i>Treatment</i>); and 2. there has not been any change to any existing prescribed drug (including an increase, decrease, or stoppage to prescribed dosage), or any recommendation or starting of a new prescription drug; and 3. the <i>Medical Condition</i> has not become worse; and 4. there has not been any new, more frequent or more severe symptoms; and 5. there has been no <i>Hospitalization</i> or referral to a specialist; and 6. there have not been any tests, investigation or <i>Treatment</i> recommended, but not yet complete, nor any outstanding test results; and 7. there is no planned or pending <i>Treatment</i>. <p>All of the above conditions must be met for a <i>Medical Condition</i> to be considered <i>Stable</i>.</p> <p>Note: The following exceptions are considered <i>Stable</i></p> <ul style="list-style-type: none"> • the routine adjustment of Coumadin, warfarin or insulin (as long as they are not newly prescribed or stopped) and there has been no change in <i>Your Medical Condition</i>; or • a change from a brand name medication to a generic brand medication of the same dosage. <p>Travelling Companion means any person who travels with <i>You</i> during the <i>Covered Trip</i> and who is sharing transportation and/or accommodation with <i>You</i>.</p> <p>Exceptions: No more than 3 individuals (including <i>You</i>) will be considered <i>Travel Companions</i> on any one trip.</p> <p>Treated or Treatment means a procedure prescribed, performed or recommended by a <i>Physician</i> for a <i>Medical Condition</i>. This includes but is not limited to prescribed medication, investigative testing and surgery.</p> <p>We, Us and Our mean:</p> <ul style="list-style-type: none"> • TD Life with respect to the medically covered causes for Trip Cancellation and Trip Interruption Insurance; and • TD Home & Auto with respect to the non-medically covered causes for Trip Cancellation and Trip Interruption Insurance. <p>You and Your mean the <i>Primary Cardholder</i>.</p>

Changes to your Certificate of Insurance, as of March 24, 2022

Benefit	Before	After
<p>Trip Cancellation / Trip Interruption Insurance</p>	<p>SECTION 3 – ELIGIBILITY The <i>Primary Cardholder</i> is eligible to be insured under this <i>Certificate</i> if, throughout the Covered Trip, the <i>Primary Cardholder</i>: • is a resident of Canada; and • has an <i>Account</i> in <i>Good Standing</i>. The <i>Primary Cardholder’s Spouse</i> is eligible to be insured under this <i>Certificate</i> if, throughout the Covered Trip: • <i>You</i> are eligible to be insured under this <i>Certificate</i> as described above, even if <i>You</i> are not travelling; and • the <i>Spouse</i> : • is a resident of Canada; and • continues to meet the definition of <i>Spouse</i> of the <i>Primary Cardholder</i>. The <i>Primary Cardholder’s Dependent Child</i> is eligible to be insured under this <i>Certificate</i> whether or not the <i>Primary Cardholder</i> or the <i>Primary Cardholder’s Spouse</i> travels with them if, throughout the Covered Trip: • <i>You</i> are eligible to be insured under this <i>Certificate</i> as described above, even if <i>You</i> are not travelling; and • the <i>Dependent Child</i>: • is a resident of Canada; • is travelling with either <i>You</i> or with <i>Your Spouse</i> ; and • continues to meet the definition of <i>Dependent Child</i>. An <i>Additional Cardholder</i> is eligible to be insured under this <i>Certificate</i> if, throughout the Covered Trip: • <i>You</i> are eligible to be insured under this <i>Certificate</i> as described above, even if <i>You</i> are not travelling; and • the <i>Additional Cardholder</i>: • is a resident of Canada; and • continues to meet the definition of <i>Additional Cardholder</i>. Note: An <i>Additional Cardholder’s Spouse</i> and children are not eligible to be insured unless they meet one of the other eligibility requirements described above (e.g. if the <i>Additional Cardholder’s child</i> is also the <i>Primary Cardholder’s Dependent Child</i>).</p>	<p>Section 3 – Eligibility The <i>Primary Cardholder</i> is eligible to be insured under this <i>Certificate</i> if, throughout the <i>Covered Trip</i>, the <i>Primary Cardholder</i>: • is a resident of Canada; and • has an <i>Account</i> in <i>Good Standing</i>. The <i>Primary Cardholder’s Spouse</i> is eligible to be insured under this <i>Certificate</i> if, throughout the <i>Covered Trip</i>: • <i>You</i> are eligible to be insured under this <i>Certificate</i> as described above, even if <i>You</i> are not travelling; and • the <i>Spouse</i>: • is a resident of Canada; and • continues to meet the definition of <i>Spouse</i> of the <i>Primary Cardholder</i>. The <i>Primary Cardholder’s Dependent Child</i> is eligible to be insured under this <i>Certificate</i> whether or not the <i>Primary Cardholder</i> and the <i>Primary Cardholder’s Spouse</i> travels with them if, throughout the <i>Covered Trip</i>: • <i>You</i> are eligible to be insured under this <i>Certificate</i> as described above, even if <i>You</i> are not travelling; and • the <i>Dependent Child</i>: • is a resident of Canada; and • continues to meet the definition of <i>Dependent Child</i>. An <i>Additional Cardholder</i> is eligible to be insured under this <i>Certificate</i> if, throughout the <i>Covered Trip</i>: • <i>You</i> are eligible to be insured under this <i>Certificate</i> as described above, even if <i>You</i> are not travelling; and • the <i>Additional Cardholder</i>: • is a resident of Canada; and • continues to meet the definition of <i>Additional Cardholder</i>. Note: An <i>Additional Cardholder’s Spouse</i> and children are not eligible to be insured, unless they meet one of the other eligibility requirements described above (e.g., if the <i>Additional Cardholder’s child</i> is also the <i>Primary Cardholder’s Dependent Child</i>).</p>
<p>Trip Cancellation / Trip Interruption Insurance</p>	<p>SECTION 4 – WHEN YOUR CERTIFICATE TERMINATES Coverage for the <i>Primary Cardholder</i> under this <i>Certificate</i> will terminate on the earliest of the following dates: • the date the <i>Account</i> is cancelled, closed or otherwise ceases to be in <i>Good Standing</i>; • the date the <i>Primary Cardholder</i> ceases to be eligible for coverage; and • the date the Group Policy terminates. Coverage for an <i>Insured Person</i> other than the <i>Primary Cardholder</i> under this <i>Certificate</i> will terminate on the earliest of the following dates: • the date coverage terminates for the <i>Primary Cardholder</i>; and • the date the <i>Insured Person</i> ceases to be eligible for coverage. No benefits will be paid under this <i>Certificate</i> for losses incurred after coverage has terminated.</p>	<p>Section 7 – How to Become Insured How to Become Insured When Your Certificate Terminates Coverage for the <i>Primary Cardholder</i> under this <i>Certificate</i> will terminate on the earliest of the following dates: • the date the <i>Account</i> is cancelled, closed or otherwise ceases to be in <i>Good Standing</i>; • the date the <i>Primary Cardholder</i> ceases to be eligible for coverage; and • the date the Group Policy terminates. Coverage for an <i>Insured Person</i> other than the <i>Primary Cardholder</i> under this <i>Certificate</i> will terminate on the earliest of the following dates: • the date coverage terminates for the <i>Primary Cardholder</i>; and • the date the <i>Insured Person</i> ceases to be eligible for coverage. No benefits will be paid under this <i>Certificate</i> for losses incurred after coverage has terminated.</p>

Changes to your Certificate of Insurance, as of March 24, 2022

Benefit	Before	After
<p>Trip Cancellation / Trip Interruption Insurance</p>	<p>SECTION 5 – THE COVERAGE PERIOD Trip Cancellation Coverage Period (when the Covered Causes for Cancellation occurs before <i>Your</i> trip) • The Trip Cancellation Coverage Period begins on the date the <i>Covered Trip</i> is booked or reserved with the travel agent or other travel supplier and at least 75% of the <i>Covered Trip</i> has been charged to <i>Your Account Using</i> a TD Credit Card and/or <i>Your Aeroplan Points</i>. • <i>Dependent Children</i> are only covered if travelling with <i>You</i> or <i>Your Spouse</i>. Therefore, for each <i>Insured Person</i> who is a Dependent Child the Trip Cancellation Coverage Period begins on the date set out above only if <i>You</i> or <i>Your Spouse</i> will be travelling with the Dependent Child on the Covered Trip. The Trip Cancellation Coverage Period ends on the earlier of:</p> <ul style="list-style-type: none"> • the date the <i>Insured Person</i> departs or plans to depart on the Covered Trip; and • the date this <i>Certificate</i> terminates. <p>Trip Interruption Coverage Period (when the Covered Causes for Interruption occurs during <i>Your</i> trip) • The Trip Interruption Coverage Period begins on the date the <i>Insured Person</i> completes a portion of the <i>Covered Trip</i> as shown on his or her invoice or <i>Ticket</i> provided the <i>Covered Trip</i> is booked or reserved with the <i>Insured Person's</i> travel agent or other travel supplier and at least 75% of the <i>Covered Trip</i> has been charged to <i>Your Account Using</i> a TD Credit Card and/or <i>Your Aeroplan Points</i>. • <i>Dependent Children</i> are only covered while travelling with <i>You</i> or <i>Your Spouse</i>. Therefore, for each <i>Insured Person</i> who is a Dependent Child the Trip Interruption Coverage Period begins on the date set out above only if <i>You</i> or <i>Your Spouse</i> are travelling with the Dependent Child on the Covered Trip. The Trip Interruption Coverage Period ends on the earlier of:</p> <ul style="list-style-type: none"> • the date the <i>Insured Person</i> is scheduled to return from the Covered Trip; and • the date this <i>Certificate</i> terminates. 	<p>Section 7 – How to Become Insured How to Become Insured <i>You</i> will have coverage if <i>You</i> meet the requirements in Section 3 – “Eligibility” for insurance.</p> <p>When does <i>Your</i> Trip Cancellation and Trip Interruption Insurance Coverage Start and End Trip Cancellation Coverage Period (when the Covered Causes for Cancellation occurs before <i>Your</i> trip)</p> <ul style="list-style-type: none"> • The Trip Cancellation Coverage Period begins on the date the <i>Covered Trip</i> is booked or reserved with the travel agent or other travel supplier and at least 75% of the cost of the <i>Covered Trip</i> has been charged to <i>Your Account</i> using a TD Credit Card and/or <i>Your Aeroplan Points</i>. <p>The Trip Cancellation Coverage Period ends on the earlier of:</p> <ul style="list-style-type: none"> • the date the <i>Insured Person</i> departs or plans to depart on the <i>Covered Trip</i>; and • the date this <i>Certificate</i> terminates. <p>Trip Interruption Coverage Period (when the Covered Causes for Interruption occurs during <i>Your</i> trip)</p> <ul style="list-style-type: none"> • The Trip Interruption Coverage Period begins on the date the <i>Insured Person</i> completes a portion of the <i>Covered Trip</i> as shown on their invoice or ticket provided the <i>Covered Trip</i> is booked or reserved with the <i>Insured Person's</i> travel agent or other travel supplier and at least 75% of the cost of the <i>Covered Trip</i> has been charged to <i>Your Account</i> using a TD Credit Card and/or <i>Your Aeroplan Points</i>. <p>The Trip Interruption Coverage Period ends on the earlier of:</p> <ul style="list-style-type: none"> • the date the <i>Insured Person</i> is scheduled to return from the <i>Covered Trip</i>; or • the date this <i>Certificate</i> terminates.

<p>Trip Cancellation / Trip Interruption Insurance</p>	<p>SECTION 6 – WHAT YOUR INSURANCE COVERS – TRIP CANCELLATION INSURANCE We will pay a Trip Cancellation Benefit with respect to an <i>Insured Person</i> if he or she is required to cancel a <i>Covered Trip</i> due to a <i>Covered Cause</i> for Cancellation listed below that occurs during the <i>Trip Cancellation Coverage Period</i> for the <i>Covered Trip</i>. Trip Cancellation Benefit means, subject to the Maximum Benefit Payable described in section 1, Eligible Trip Cancellation Expenses. Eligible Trip Cancellation Expenses means one of the following two options:</p> <ul style="list-style-type: none"> • reimbursement for: <ul style="list-style-type: none"> • the portion of the <i>Insured Person's</i> unused travel arrangements which Were: <ul style="list-style-type: none"> • Paid in advance and at least 75% was charged to <i>Your Account</i> and/or <i>Using Your Aeroplan Points</i>; • Forfeited as a result of a <i>Covered Cause</i> for Cancellation; and • Non-refundable on the date the <i>Covered Cause</i> for Cancellation arose; and • travel point administration cancellation fees that applied on the date the <i>Covered Cause</i> for Cancellation arose, where applicable; but Exclusion: there will be no reimbursement for the cost of any additional travel insurance; • or, in the alternative, if the <i>Insured Person</i> misses the scheduled departure as a result of a <i>Covered Cause</i> for Cancellation, payment of reasonable transportation costs that are: <ul style="list-style-type: none"> • required for the <i>Insured Person</i> to travel to the destination of the <i>Covered Trip</i> by the most direct route; and • approved in advance by the <i>Administrator</i>. <p>Covered Causes for Cancellation Covered Causes for Cancellation mean Medical Covered Causes for Cancellation and Non-Medical Covered Causes for Cancellation, as described below. Medical Covered Causes for Cancellation mean:</p> <ul style="list-style-type: none"> • death of an <i>Insured Person</i> or <i>Travelling Companion</i>; • sudden and unexpected sickness or accidental injury of an <i>Insured Person</i> or <i>Travelling Companion</i> if: <ul style="list-style-type: none"> • it did not result from a <i>Pre-Existing Condition</i> that was not <i>Stable</i> during the <i>Pre-Existing Condition Period</i> immediately preceding the beginning of the <i>Coverage Period</i>; • it prevents the <i>Insured Person</i> from starting the <i>Covered Trip</i>; • a <i>Physician</i> certifies, in writing: <ul style="list-style-type: none"> • that: <ul style="list-style-type: none"> • he or she has advised the <i>Insured Person</i> or <i>Travelling Companion</i> to cancel the <i>Covered Trip</i>; or • the sickness or injury made it impossible for the <i>Insured Person</i> or <i>Travelling Companion</i> to start the <i>Covered Trip</i>; and • the medical reason for the decision; and • The <i>Insured Person</i> or <i>Travelling Companion</i> provides the <i>Physician's</i> certification to the <i>Administrator</i> before the scheduled departure date; • death of an <i>Immediate Family Member</i> of the <i>Insured Person</i>; • sudden and unexpected sickness or accidental injury of an <i>Immediate Family Member</i> of the <i>Insured Person</i>; or • the sudden 	<p>Section 5 – Description of Insurance Coverage Trip Cancellation and Trip Interruption Insurance Benefits Trip Cancellation and Trip Interruption Insurance provides coverage for the following causes for Cancellation and Interruption.</p> <p>Trip Cancellation Insurance Benefits We will pay a Trip Cancellation Benefit with respect to an <i>Insured Person</i> if they are required to cancel a <i>Covered Trip</i> due to a <i>Covered Cause</i> for Cancellation listed below that occurs during the <i>Trip Cancellation Coverage Period</i> for the <i>Covered Trip</i>.</p> <p>Trip Cancellation Benefit means Eligible Trip Cancellation Expenses, subject to the Maximum Benefit Payable described in Section 2 – “Summary of Benefits”.</p> <p>Eligible Trip Cancellation Expenses mean one of the following two options:</p> <ol style="list-style-type: none"> 1. Reimbursement for: <ol style="list-style-type: none"> a) the portion of the <i>Insured Person's</i> unused travel arrangements, which were: <ul style="list-style-type: none"> • Paid in advance and at least 75% of the cost was charged to <i>Your Account</i> and/or using <i>Your Aeroplan Points</i>; • Forfeited as a result of a <i>Covered Cause</i> for Cancellation; and • Non-refundable on the date the <i>Covered Cause</i> for Cancellation arose; and b) travel point administration cancellation fees that applied on the date the <i>Covered Cause</i> for Cancellation arose, where applicable; but <p>Exclusion: There will be no reimbursement for the cost of any additional travel insurance;</p> <ol style="list-style-type: none"> 2. Or, in the alternative, if the <i>Insured Person</i> misses the scheduled departure as a result of a <i>Covered Cause</i> for Cancellation, payment of reasonable transportation costs that are: <ol style="list-style-type: none"> a) required for the <i>Insured Person</i> to travel to the destination of the <i>Covered Trip</i> by the most direct route; and b) approved in advance by the <i>Administrator</i>. <p>Covered Causes for Cancellation Covered Causes for Cancellation mean Medical Covered Causes for Cancellation and Non-Medical Covered Causes for Cancellation, as described below.</p> <p>a) Medical Covered Causes for Cancellation mean:</p> <ul style="list-style-type: none"> • death of an <i>Insured Person</i> or <i>Travelling Companion</i>; • sudden and unexpected sickness or accidental injury of an <i>Insured Person</i> or <i>Travelling Companion</i> if: <ul style="list-style-type: none"> • it did not result from a <i>Pre-Existing Medical Condition</i> that was not <i>Stable</i> during the <i>Pre-Existing Medical Condition Period</i> immediately preceding the beginning of the <i>Coverage Period</i>; • it prevents the <i>Insured Person</i> from starting the <i>Covered Trip</i>; • a <i>Physician</i> certifies, in writing: <ul style="list-style-type: none"> <input type="checkbox"/> they have advised the <i>Insured Person</i> or <i>Travelling Companion</i> to cancel the <i>Covered Trip</i>; or <input type="checkbox"/> the sickness or injury made it impossible for the <i>Insured Person</i> or <i>Travelling Companion</i> to start the <i>Covered Trip</i>; and <input type="checkbox"/> the medical reason for the decision; and <input type="checkbox"/> the <i>Insured Person</i> or <i>Travelling Companion</i> provides the <i>Physician's</i> certification to the <i>Administrator</i> before the scheduled <i>Departure Date</i>; • death of an <i>Immediate Family Member</i> of the <i>Insured Person</i>;
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	<p>and unexpected death or <i>Hospitalization of an Insured Person's</i> host at the destination. Non-Medical Covered Causes for Cancellation mean: • an enforceable call of an <i>Insured Person</i> or <i>Travelling Companion</i> to jury duty or sudden and unexpected subpoena of an <i>Insured Person</i> or <i>Travelling Companion</i> to act as a witness in a court of law requiring the <i>Insured Person's</i> or <i>Travelling Companion's</i> presence in court during the Covered Trip; • a written formal notice issued by the Department of Foreign Affairs and International Trade of the Canadian government after the <i>Insured Person's Covered Trip</i> is booked, advising Canadians not to travel to a country, region or city originally <i>Ticketed</i> for the <i>Covered Trip</i> for a period that includes an <i>Insured Person's Covered Trip</i>; • an employment transfer of the <i>Insured Person</i> by the employer with whom the <i>Insured Person</i> was employed on the date the <i>Insured Person</i> booked his or her Covered Trip, which transfer requires the relocation of the <i>Insured Person's</i> principal residence within 30 days before the <i>Insured Person's</i> scheduled <i>Covered Trip</i> departure date; • a delay causing an <i>Insured Person</i> to miss a connection for a <i>Common Carrier</i> or resulting in the interruption of an <i>Insured Person's</i> travel arrangements, and is limited to the following: • delay of an <i>Insured Person's Common Carrier</i> resulting from the mechanical failure of that carrier; 37 • a traffic accident or an emergency police-directed road closure (either must be substantiated by a police report); or • <i>Weather</i> conditions. Exclusion: The outright cancellation of <i>Common Carrier</i> travel is not considered a delay. Limitation: The benefit under this Covered Cause for Cancellation is the <i>Insured Person's</i> one-way economy fare via the most cost-effective route to the <i>Insured Person's</i> next destination; • a natural disaster that renders an <i>Insured Person's</i> principal residence uninhabitable; • an <i>Insured Person</i> is quarantined in a situation where no Medical Covered Cause for Cancellation applies; • an <i>Insured Person</i> is hijacked; and • an enforceable call to service of an <i>Insured Person</i> or <i>Travelling Companion</i> who is a military, police or fire reservist. Limitations and Exclusions 1. <i>Pre-Existing Condition</i> • There is no coverage and no benefit will be payable for any <i>Pre-Existing Condition</i> that was not <i>Stable</i> during the <i>Pre-Existing Condition</i> Period immediately preceding the Coverage Period. 2. Reasonably foreseeable conditions • No benefit will be payable with respect to a sickness, accidental injury or quarantine of the <i>Insured Person</i> that was reasonably foreseeable when the Trip Cancellation Coverage Period began. 3. Cancellation penalties arising after Covered Cause for Cancellation •</p>	<ul style="list-style-type: none"> • sudden and unexpected sickness or accidental injury of an <i>Immediate Family Member</i> of the <i>Insured Person</i>; or • the sudden and unexpected death or hospitalization of an <i>Insured Person's</i> host at the destination. <p>b) Non-Medical Covered Causes for Cancellation mean:</p> <ul style="list-style-type: none"> • an enforceable call of an <i>Insured Person</i> or <i>Travelling Companion</i> to jury duty or sudden and unexpected subpoena of an <i>Insured Person</i> or <i>Travelling Companion</i> to act as a witness in a court of law requiring the <i>Insured Person's</i> or <i>Travelling Companion's</i> presence in court during the <i>Covered Trip</i>; • a written formal notice issued by the Canadian government after the <i>Insured Person's Covered Trip</i> is booked, advising Canadians not to travel to a country, region or city originally ticketed for the <i>Covered Trip</i> for a period that includes an <i>Insured Person's Covered Trip</i>; • an employment transfer of the <i>Insured Person</i> by the employer with whom the <i>Insured Person</i> was employed on the date the <i>Insured Person</i> booked their <i>Covered Trip</i>, which transfer requires the relocation of the <i>Insured Person's</i> principal residence within 30 days before the <i>Insured Person's</i> scheduled <i>Covered Trip</i> departure date; • a delay causing an <i>Insured Person</i> to miss a connection for a <i>Common Carrier</i> or resulting in the interruption of an <i>Insured Person's</i> travel arrangements, and is limited to the following: <ul style="list-style-type: none"> • delay of an <i>Insured Person's Common Carrier</i> resulting from the mechanical failure of that carrier; • a traffic accident or an emergency police-directed road closure (either must be substantiated by a police report); or • weather conditions. • a natural disaster that renders an <i>Insured Person's</i> principal residence uninhabitable; • an <i>Insured Person</i> is quarantined in a situation where no Medical Covered Cause for Cancellation applies; • an <i>Insured Person</i> is hijacked; and • an enforceable call to service of an <i>Insured Person</i> or <i>Travelling Companion</i> who is a military, police or fire reservist. <p>Exclusion: The outright cancellation of <i>Common Carrier</i> travel is not considered a delay.</p> <p>Limitation: The benefit under this Covered Cause for Cancellation is the <i>Insured Person's</i> one-way economy fare via the most cost-effective route to the <i>Insured Person's</i> next destination.</p> <p>Trip Interruption Insurance Benefits: We will pay a Trip Interruption Benefit with respect to an <i>Insured Person</i> if they are prevented from continuing a <i>Covered Trip</i> as a result of a Covered Cause for Interruption listed below that occurs during the Trip Interruption Coverage Period for the <i>Covered Trip</i>.</p> <p>Trip Interruption Benefit means Eligible Trip Interruption Expenses, subject to the Maximum Benefit Payable described in Section 2 – “Summary of Benefits”.</p> <p>Eligible Trip Interruption Expenses mean:</p> <ul style="list-style-type: none"> • if the <i>Insured Person</i> must terminate the <i>Covered Trip</i> as a result of the Covered Cause for Interruption, the lesser of: <ul style="list-style-type: none"> • the cost of a one-way economy airfare to the point of departure, if the
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	<p>Benefits will be limited to cancellation penalties in effect on the date the Covered Cause for Cancellation arises, so it is important to cancel the <i>Insured Person's</i> travel plans immediately. 4. Causes not covered • No benefit will be payable with respect to cancellation of a <i>Covered Trip</i> for any reason other than those listed under Covered Causes for Cancellation. 5. Frequent flyer plan rewards units • Under no circumstance will any benefit be payable in connection with the value of frequent flyer plan rewards units that have been lost or wasted.</p>	<p><i>Administrator</i> approves this transportation in advance; or</p> <ul style="list-style-type: none"> • the fee charged by the airline to change the <i>Insured Person's</i> date of return; <ul style="list-style-type: none"> • if the <i>Insured Person</i> is delayed in reaching the next destination of their <i>Covered Trip</i> as a result of a Covered Cause for Interruption, payment of reasonable additional transportation costs that are: <ul style="list-style-type: none"> • required for the <i>Insured Person</i> to rejoin a tour group by the most direct route; and • approved in advance by the <i>Administrator</i>; and • the portion of any unused land arrangements which were: <ul style="list-style-type: none"> • part of the <i>Insured Person's Covered Trip</i>; • paid prior to the <i>Insured Person's</i> date of departure; and • non-refundable on the date the Covered Cause of Interruption occurred. <p>Covered Causes for Interruption Covered Causes for Interruption mean Medical Covered Causes for Interruption and Non-Medical Covered Causes for Interruption, as described below.</p> <p>a) Medical Covered Causes for Interruption mean:</p> <ul style="list-style-type: none"> • death of an <i>Insured person</i>; • accidental injury or sickness of an <i>Insured Person</i> if: <ul style="list-style-type: none"> • it does not result from a <i>Pre-Existing Medical Condition</i> that was not <i>Stable</i> during the <i>Pre-Existing Medical Condition Period</i> immediately preceding the beginning of the <i>Coverage Period</i>; and • in the opinion of the <i>Administrator</i>, it requires immediate medical attention; and either: <ul style="list-style-type: none"> <input type="checkbox"/> it prevents the <i>Insured Person</i> from continuing with the <i>Covered Trip</i>; or <input type="checkbox"/> the <i>Insured Person</i> will be delayed in reaching the next destination of their <i>Covered Trip</i>; • death of an <i>Immediate Family Member</i> of the <i>Insured Person</i>; • sudden and unexpected sickness or accidental injury of an <i>Immediate Family Member</i>, which requires an overnight stay in a <i>Hospital</i>. <p>b) Non-Medical Covered Causes for Interruption mean:</p> <ul style="list-style-type: none"> • a written formal notice issued during the <i>Covered Trip</i> by the Canadian government, advising Canadians not to travel to a country, region or city originally ticketed for the <i>Covered Trip</i> for a period that includes an <i>Insured Person's Covered Trip</i>; • a delay causing an <i>Insured Person</i> to miss a connection for a <i>Common Carrier</i> or resulting in the interruption of an <i>Insured Person's</i> travel arrangements, and is limited to the following: <ul style="list-style-type: none"> • a delay of an <i>Insured Person's Common Carrier</i>, resulting from the mechanical failure of that carrier; • a traffic accident or an emergency police-directed road closure (either must be substantiated by a police report); or • weather conditions. • a natural disaster that renders an <i>Insured Person's</i> principal residence uninhabitable; • an <i>Insured Person's</i> quarantine or hijacking; and • an enforceable call to service of an <i>Insured Person</i> who is a military, police or fire reservist.
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Changes to your Certificate of Insurance, as of March 24, 2022

Benefit	Before	After
		<p>Exclusion: The outright cancellation of a flight is not considered as a delay.</p> <p>Limitation: The benefit under this Covered Cause for Interruption is the <i>Insured Person's</i> one-way economy fare via the most cost-effective route to the <i>Insured Person's</i> next destination.</p>

<p>Trip Cancellation / Trip Interruption Insurance</p>	<p>SECTION 7 – WHAT YOUR INSURANCE COVERS - TRIP INTERRUPTION INSURANCE</p> <p>We will pay a Trip Interruption Benefit with respect to an Insured Person if he or she is prevented from continuing a Covered Trip as a result of a Covered Cause for Interruption listed below that occurs during the Trip Interruption Coverage Period for the Covered Trip.</p> <p>Trip Interruption Benefit means, subject to the Maximum Benefit Payable described in section 1, Eligible Trip Interruption Expenses.</p> <p>Eligible Trip Interruption Expenses means:</p> <ul style="list-style-type: none"> • if the Insured Person must terminate the Covered Trip as a result of the Covered Cause for Interruption, the lesser of: <ul style="list-style-type: none"> • the cost of a one-way economy airfare to the point of departure, if the Administrator approves this transportation in advance; or • the fee charged by the airline to change the Insured Person's date of return; • if the Insured Person is delayed in reaching the next destination of his or her Covered Trip as a result of a Covered Cause for Interruption, payment of reasonable additional transportation costs that are: <ul style="list-style-type: none"> • required for the Insured Person to rejoin a tour group by the most direct route; and • approved in advance by the Administrator; and • the portion of any unused land arrangements which were: <ul style="list-style-type: none"> • part of the Insured Person's Covered Trip; • paid prior to the Insured Person's date of departure; and • non-refundable on the date the Covered Cause of Interruption occurred. <p>Covered Causes for Interruption</p> <p>Covered Causes for Interruption mean Medical Covered Causes for Interruption and Non-Medical Covered Causes for Interruption, as described below.</p> <p>Medical Covered Causes for Interruption mean:</p> <ul style="list-style-type: none"> • death of an Insured person; • accidental injury or sickness of an Insured Person if: <ul style="list-style-type: none"> • it does not result from a Pre-Existing Condition that was not Stable during the Pre-Existing Condition Period immediately preceding the beginning of the Coverage Period; and • in the opinion of the Administrator: <ul style="list-style-type: none"> • it requires immediate medical attention; and • either: <ul style="list-style-type: none"> • it prevents the Insured Person from continuing with the Covered Trip; or • the Insured Person will be delayed in reaching the next destination of his or her Covered Trip; • death of an Immediate Family Member of the Insured Person; 	<p>Section 5 – Description of Insurance Coverage</p> <p>Trip Interruption Insurance Benefits:</p> <p>We will pay a Trip Interruption Benefit with respect to an <i>Insured Person</i> if they are prevented from continuing a <i>Covered Trip</i> as a result of a Covered Cause for Interruption listed below that occurs during the Trip Interruption Coverage Period for the <i>Covered Trip</i>.</p> <p>Trip Interruption Benefit means Eligible Trip Interruption Expenses, subject to the Maximum Benefit Payable described in Section 2 – “Summary of Benefits”.</p> <p>Eligible Trip Interruption Expenses mean:</p> <ul style="list-style-type: none"> • if the <i>Insured Person</i> must terminate the <i>Covered Trip</i> as a result of the Covered Cause for Interruption, the lesser of: <ul style="list-style-type: none"> • the cost of a one-way economy airfare to the point of departure, if the <i>Administrator</i> approves this transportation in advance; or • the fee charged by the airline to change the <i>Insured Person's</i> date of return; • if the <i>Insured Person</i> is delayed in reaching the next destination of their <i>Covered Trip</i> as a result of a Covered Cause for Interruption, payment of reasonable additional transportation costs that are: <ul style="list-style-type: none"> • required for the <i>Insured Person</i> to rejoin a tour group by the most direct route; and • approved in advance by the <i>Administrator</i>; and • the portion of any unused land arrangements which were: <ul style="list-style-type: none"> • part of the <i>Insured Person's Covered Trip</i>; • paid prior to the <i>Insured Person's</i> date of departure; and • non-refundable on the date the Covered Cause of Interruption occurred. <p>Covered Causes for Interruption</p> <p>Covered Causes for Interruption mean Medical Covered Causes for Interruption and Non-Medical Covered Causes for Interruption, as described below.</p> <p>a) Medical Covered Causes for Interruption mean:</p> <ul style="list-style-type: none"> • death of an <i>Insured person</i>; • accidental injury or sickness of an <i>Insured Person</i> if: <ul style="list-style-type: none"> • it does not result from a <i>Pre-Existing Medical Condition</i> that was not <i>Stable</i> during the <i>Pre-Existing Medical Condition Period</i> immediately preceding the beginning of the <i>Coverage Period</i>; and • in the opinion of the <i>Administrator</i>, it requires immediate medical attention; and either: <ul style="list-style-type: none"> <input type="checkbox"/> it prevents the <i>Insured Person</i> from continuing with the <i>Covered Trip</i>; or <input type="checkbox"/> the <i>Insured Person</i> will be delayed in reaching the next destination of their <i>Covered Trip</i>; • death of an <i>Immediate Family Member</i> of the <i>Insured Person</i>; • sudden and unexpected sickness or accidental injury of an <i>Immediate Family Member</i>, which requires an overnight stay in a <i>Hospital</i>. <p>b) Non-Medical Covered Causes for Interruption mean:</p> <ul style="list-style-type: none"> • a written formal notice issued during the <i>Covered Trip</i> by the Canadian government, advising Canadians not to travel to a country, region or city originally ticketed for the <i>Covered</i>
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Changes to your Certificate of Insurance, as of March 24, 2022

Benefit	Before	After
	<ul style="list-style-type: none"> • sudden and unexpected sickness or accidental injury of an Immediate Family Member which requires an overnight stay in a Hospital. <p>Non-Medical Covered Causes for Interruption mean:</p> <ul style="list-style-type: none"> • a written formal notice issued during the Covered Trip by the Department of Foreign Affairs and International Trade of the Canadian government, advising Canadians not to travel to a country, region or city originally ticketed for the Covered Trip for a period that includes an Insured Person's Covered Trip; • a delay causing an Insured Person to miss a connection for a Common Carrier or resulting in the interruption of an Insured Person's travel arrangements, and is limited to the following: <ul style="list-style-type: none"> • a delay of an Insured Person's Common Carrier, resulting from the mechanical failure of that carrier; • a traffic accident or an emergency police-directed road closure (either must be substantiated by a police report), or • weather conditions. <p>Exclusion: The outright cancellation of a flight is not considered as a delay.</p> <p>Limitation: The benefit under this Covered Cause for Interruption is the Insured Person's one-way economy fare via the most cost-effective route to the Insured Person's next destination;</p> <ul style="list-style-type: none"> • a natural disaster that renders an Insured Person's principal residence uninhabitable; • an Insured Person's quarantine or hijacking; and • an enforceable call to service of an Insured Person who is a military, police or fire reservist. 	<p><i>Trip</i> for a period that includes an <i>Insured Person's Covered Trip</i>;</p> <ul style="list-style-type: none"> • a delay causing an <i>Insured Person</i> to miss a connection for a <i>Common Carrier</i> or resulting in the interruption of an <i>Insured Person's</i> travel arrangements, and is limited to the following: <ul style="list-style-type: none"> • a delay of an <i>Insured Person's Common Carrier</i>, resulting from the mechanical failure of that carrier; • a traffic accident or an emergency police-directed road closure (either must be substantiated by a police report); or • weather conditions. • a natural disaster that renders an <i>Insured Person's</i> principal residence uninhabitable; • an <i>Insured Person's</i> quarantine or hijacking; and • an enforceable call to service of an <i>Insured Person</i> who is a military, police or fire reservist. <p>Exclusion: The outright cancellation of a flight is not considered as a delay.</p> <p>Limitation: The benefit under this Covered Cause for Interruption is the <i>Insured Person's</i> one-way economy fare via the most cost-effective route to the <i>Insured Person's</i> next destination.</p> <p>What to do if You need to Interrupt Your Covered Trip</p> <p>The <i>Insured Person</i> must call <i>Our Administrator</i> immediately at the 24-Hour Emergency Assistance number found in Section 9 – "How to Contact <i>Our Administrator</i>". Some expenses are only covered if they're approved in advance by <i>Our Administrator</i>. All transportation expenses must be pre-approved. Only the expenses that are non-refundable on the day the Covered Cause for Interruption occurs are eligible for reimbursement, so contact <i>Our Administrator</i> immediately but no later than within 24 hours to discuss alternate travel arrangements.</p>

<p>Trip Cancellation / Trip Interruption Insurance</p>	<p>SECTION 7 – WHAT YOUR INSURANCE COVERS - TRIP INTERRUPTION INSURANCE</p> <p>Limitations and Exclusions</p> <ol style="list-style-type: none"> 1. Pre-Existing Conditions <ul style="list-style-type: none"> • There is no coverage and no benefit will be paid for any Pre-Existing Condition that was not Stable during the Pre-Existing Condition Period immediately preceding the beginning of the Coverage Period. 2. Reasonably foreseeable conditions <ul style="list-style-type: none"> • No benefit will be payable with respect to a sickness or accidental injury of the Insured Person that was reasonably foreseeable when the Insured Person departed on the Covered Trip. 3. Interruption occurring outside the Coverage Period <ul style="list-style-type: none"> • No benefit will be payable with respect to an interruption that occurs before the Trip Interruption Coverage Period begins or after it ends. 4. Sums that become non-refundable after the Covered Cause for Interruption occurs <ul style="list-style-type: none"> • Only the sums that are non-refundable on the day the Covered Cause for Interruption occurs will be eligible for the purposes of this claim, so it's important to call the Administrator immediately to discuss alternate arrangements. 5. Causes not covered <ul style="list-style-type: none"> • No benefit will be payable with respect to interruption of a Covered Trip for any reason other than those listed under Covered Causes for Interruption. 6. Frequent flyer plan rewards units <ul style="list-style-type: none"> • Under no circumstance will any benefit be payable in connection with the value of frequent flyer plan rewards units that have been lost or wasted. 7. Unused Return Travel <ul style="list-style-type: none"> • Under no circumstance will Trip Interruption Benefits include the cost of prepaid unused return travel. <p>SECTION 8 – LIMITATIONS AND EXCLUSIONS: WHAT YOUR INSURANCE DOES NOT COVER</p> <p>Limitations and exclusions that apply to a particular benefit are found above, in the description of those benefits. In addition, for all benefits, this <i>Certificate</i> does not cover any <i>Treatment</i>, services, or expenses of any kind caused directly or indirectly as a result of the following: • Pre-Existing Conditions; • reasonably foreseeable Medical Conditions; • failure to report a Covered Cause for Trip Cancellation or Trip Interruption immediately; • failure to obtain advance approval from the <i>Administrator</i> for certain expenses, including travel arrangements; Please see the relevant benefit section for details. In addition: 1. No benefit will be payable in connection</p>	<p>Section 6 – Limitations and Exclusions</p> <p>Limitations and Exclusions that Apply to Trip Cancellation</p> <p>For Trip Cancellation, this <i>Certificate</i> does not cover any <i>Treatment</i>, services, or expenses of any kind caused directly or indirectly as a result of the following:</p> <ol style="list-style-type: none"> 1. <i>Pre-Existing Medical Condition</i> <ul style="list-style-type: none"> • There is no coverage and no benefit will be payable for any <i>Pre-Existing Medical Condition</i> that was not <i>Stable</i> during the <i>Pre-Existing Medical Condition Period</i> immediately preceding the <i>Coverage Period</i>. 2. Reasonably foreseeable conditions <ul style="list-style-type: none"> • No benefit will be payable with respect to a sickness, accidental injury or quarantine of the <i>Insured Person</i> that was reasonably foreseeable when the Trip Cancellation <i>Coverage Period</i> began. 3. Cancellation penalties arising after Covered Cause for Cancellation <ul style="list-style-type: none"> • Benefits will be limited to cancellation penalties in effect on the date the Covered Cause for Cancellation arises, so it is important to cancel the <i>Insured Person's</i> travel plans immediately. 4. Causes not covered <ul style="list-style-type: none"> • No benefit will be payable with respect to cancellation of a <i>Covered Trip</i> for any reason other than those listed under Covered Causes for Cancellation. <p>Limitations and Exclusions that Apply to Trip Interruption</p> <p>For Trip Interruption, this <i>Certificate</i> does not cover any <i>Treatment</i>, services, or expenses of any kind caused directly or indirectly as a result of the following:</p> <ol style="list-style-type: none"> 1. <i>Pre-Existing Medical Condition</i> <ul style="list-style-type: none"> • There is no coverage and no benefit will be payable for any <i>Pre-Existing Medical Condition</i> that was not <i>Stable</i> during the <i>Pre-Existing Medical Condition Period</i> immediately preceding the beginning of the <i>Coverage Period</i>. 2. Reasonably foreseeable conditions <ul style="list-style-type: none"> • No benefit will be payable with respect to a sickness or accidental injury of the <i>Insured Person</i> that was reasonably foreseeable when the <i>Insured Person</i> departed on the <i>Covered Trip</i>. 3. Interruption occurring outside the <i>Coverage Period</i> <ul style="list-style-type: none"> • No benefit will be payable with respect to an interruption that occurs before the Trip Interruption <i>Coverage Period</i> begins or after it ends. 4. Sums that become non-refundable after the Covered Cause for Interruption occurs <ul style="list-style-type: none"> • Only the sums that are non-refundable on the day the Covered Cause for Interruption occurs will be eligible for the purposes of this claim, so it's important to call the <i>Administrator</i> immediately to discuss alternate arrangements. 5. Causes not covered <ul style="list-style-type: none"> • No benefit will be payable with respect to Interruption of a <i>Covered Trip</i> for any reason other than those listed under Covered Causes for Interruption. 6. Unused Return Travel <ul style="list-style-type: none"> • Under no circumstance will Trip Interruption Benefits include the cost of prepaid unused return travel. <p>Limitations and Exclusions that Apply to Trip Cancellation and Trip Interruption</p> <p>For all benefits, this <i>Certificate</i> does not cover any <i>Treatment</i>, services, or expenses of any</p>
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	<p>with losses related to or resulting from:</p> <p>a. Pregnancy • pregnancy or childbirth within 9 Weeks of expected delivery date; • any complication relating to pregnancy that occurs in the last 9 Weeks leading up to the expected 40 delivery date, or after the expected delivery date; • any child born during the <i>Covered Trip</i> in question; b. Intentionally inflicted injuries • intentionally inflicted injuries, suicide or attempted suicide, while either sane or insane; c. Alcohol or drug Use • abuse of medication or alcohol or Use of illicit drugs; d. Crime • participation in a criminal offence; e. Professional Sports or Racing • participation in professional sports or any organized racing or speed contests; f. War • any act of war, whether declared or not, hostile or warlike action in time of peace or war, insurrection, rebellion, revolution, civil war or hijacking; g. Mental Problems • any mental, nervous or emotional problems; h. Hazardous Activities • recreational scuba diving (unless the <i>Insured Person</i> holds a basic scuba designation from a certified school or licensing body), <i>Mountaineering</i>, bungee-jumping, parachuting, parasailing, cave exploration, hang-gliding, skydiving or any airborne activity in any aircraft other than a passenger aircraft that holds a valid <i>Certificate</i> of airworthiness; i. Travel Advisories • travel in a country if the Canadian government had issued a travel advisory for that country that was in effect immediately before the <i>Coverage Period</i> for the benefit in question began. 2. Dependent Child not travelling with <i>You</i> or <i>Your Spouse</i> No benefit will be payable: • with respect to a Dependent Child unless he or she is travelling • with <i>You</i>; or • if <i>Your Spouse</i> is an <i>Insured Person</i> under this <i>Certificate</i>, with <i>Your Spouse</i></p>	<p>kind caused directly or indirectly as a result of the following:</p> <ol style="list-style-type: none"> 1. <i>Pre-Existing Medical Condition</i>; 2. reasonably foreseeable <i>Medical Conditions</i>; 3. failure to report a Covered Cause for Trip Cancellation or Trip Interruption immediately; 4. failure to obtain advance approval from the <i>Administrator</i> for certain expenses, including travel arrangements. 5. False Claim <p>If <i>You</i> or an <i>Insured Person</i> makes a claim knowing it to be false or fraudulent in any respect, neither <i>You</i> nor the <i>Insured Person</i> will be entitled to the benefits of this coverage, nor to the payment of any claim under the Group Policies.</p> <ol style="list-style-type: none"> 6. Illegal act <ul style="list-style-type: none"> • claim that results from or is related to <i>Your</i> involvement in the commission or attempted commission of a criminal offence or illegal act in the jurisdiction where the claim was incurred, including driving while impaired or over the legal limit. 7. Abuse of alcohol, drug, or intoxicants <ul style="list-style-type: none"> • claim that results from or is related to <i>Your</i> chronic use of alcohol, drugs or other intoxicants whether prior to or during <i>Your Covered Trip</i>. 8. Claims related to expectant mother's complications of pregnancy, or delivery <ul style="list-style-type: none"> • claim related to routine pre-natal or post-natal care; or • claim related to pregnancy, delivery or complications of either, arising 9 weeks before the expected date of delivery or any time after delivery. 9. Child born during the <i>Covered Trip</i> <ul style="list-style-type: none"> • claim related to <i>Your</i> child born during the <i>Covered Trip</i>. 10. War or civil unrest <ul style="list-style-type: none"> • an act of war, whether declared or undeclared; or • hostile or warlike action in time of peace or war; or • willing participation in a riot or civil unrest; or • rebellion; or • revolution; or • insurrection; or • any service in the armed forces while on duty. 11. Travel advisory <ul style="list-style-type: none"> • where an official travel advisory was issued by the Canadian government stating, "Avoid all non-essential travel" or "Avoid all travel" regarding the country, region or city of <i>Your</i> destination, before <i>Your Coverage Period</i> begins for Trip Cancellation benefit; or • if the travel advisory or formal notice stating "Avoid all non-essential travel" or "Avoid all travel" is issued after <i>Your Departure Date</i> for Trip Interruption benefit, <i>Your</i> coverage under this policy in that specific country, region or area will be limited to a period that is reasonably necessary for <i>You</i> to safely evacuate the country, region or area. <p>To view the travel advisories, visit the Government of Canada Travel site.</p> 12. Other – Sports and High-Risk Activities <ul style="list-style-type: none"> • participation in: <ul style="list-style-type: none"> • any sporting activity for which <i>You</i> are paid; • any sporting event for which the winners are awarded cash prizes; • any extreme sport or activity involving a high level of risk, such as those indicated below, but not limited to: <ul style="list-style-type: none"> <input type="checkbox"/> parasailing, hang-gliding and paragliding; <input type="checkbox"/> parachuting and sky diving;
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Changes to your Certificate of Insurance, as of March 24, 2022

Benefit	Before	After
		<ul style="list-style-type: none"> <input type="checkbox"/> bungee jumping; <input type="checkbox"/> <i>Mountaineering</i>; <input type="checkbox"/> cave exploration; <input type="checkbox"/> scuba diving, outside the limits of <i>Your</i> certification; <input type="checkbox"/> any airborne activity in any aircraft other than a passenger aircraft that holds a valid certificate of airworthiness; <input type="checkbox"/> any competition, speed event or other high-risk activity involving the use of a motor vehicle on land, water or air, including training activities, whether on approved tracks or elsewhere. <p>13. Intentional self-inflicted injury</p> <ul style="list-style-type: none"> • intentional self-inflicted injury, suicide or attempted suicide (whether or not the <i>Insured Person</i> is aware of the result of their actions), regardless of the <i>Insured Person's</i> state of mind. <p>14. Reasons for Cancellation or Interruption occurring outside the <i>Coverage Period</i></p> <ul style="list-style-type: none"> • an incident that occurs outside the <i>Coverage Period</i>. <p>For example, no benefit will be paid with respect to an incident that occurs after 11:59 p.m. ET on the last day of the <i>Coverage Period</i>, if <i>You</i> have not extended <i>Your Coverage Period</i>.</p> <p>Note: The day of departure counts as a full day for this purpose.</p> <p>15. Coverage and/or payment benefit prohibited by law</p> <ul style="list-style-type: none"> • This coverage shall be null and void and no benefit will be payable where the coverage and/or payment of the benefit is prohibited by Canadian law or by any other applicable national economic or trade sanctions law or regulation. <p>16. <i>Aeroplan Points</i> or any other Frequent flyer plan rewards units</p> <ul style="list-style-type: none"> • Under no circumstance will any benefit be payable in connection with the value of <i>Aeroplan Points</i> or frequent flyer plan rewards units that have been lost or wasted.

Changes to your Certificate of Insurance, as of March 24, 2022

Benefit	Before	After
<p>Trip Cancellation / Trip Interruption Insurance</p>	<p>SECTION 9 – WHAT TO DO IF YOU NEED TO CANCEL OR INTERRUPT A TRIP</p> <p>Trip Cancellation It is important to call the Administrator immediately at the 24 Hour Emergency Assistance number found in section 11, below. The amount payable under Trip Cancellation coverage is limited to the cancellation penalties in effect on the date the Covered Cause for Cancellation occurs, so it's important to cancel the Insured Person's plans immediately but no later than within one day. After the Insured Person has cancelled his or her travel arrangements with the travel supplier, the Insured Person will need to follow the instructions under Section 10 – How To Make A Claim.</p> <p>Trip Interruption The Insured Person must call the Administrator immediately at the 24 Hour Emergency Assistance number found in section 11, below. Some expenses are only covered if they're approved in advance by the Administrator. All transportation expenses must be pre-approved. Only the expenses that are non-refundable on the day the Covered Cause for Interruption occurs are eligible for reimbursement, so contact the Administrator immediately but no later than within one day to discuss alternate travel arrangements.</p>	<p>Section 5 – Description of Insurance Coverage</p> <p>What to do if You need to Cancel Your Covered Trip Reimbursement for the portion of the <i>Insured Person's</i> unused travel arrangements which were paid in advance and at least 75% of the cost was charged to <i>Your Account</i> and/or using <i>Your Aeroplan Points</i>. The amount payable under Trip Cancellation Insurance coverage is limited to the cancellation penalties in effect on the date the Covered Cause for Cancellation occurs, so it's important to cancel the <i>Insured Person's</i> plans immediately but no later than within 24 hours of cancellation with <i>Your</i> travel agent or travel supplier. After the <i>Insured Person</i> has cancelled their travel arrangements with the travel supplier, the <i>Insured Person</i> will need to call <i>Our Administrator</i> immediately, and follow the instructions in Section 8 – "How to Submit a Claim".</p> <p>What to do if You need to Interrupt Your Covered Trip The <i>Insured Person</i> must call <i>Our Administrator</i> immediately at the 24-Hour Emergency Assistance number found in Section 9 – "How to Contact <i>Our Administrator</i>". Some expenses are only covered if they're approved in advance by <i>Our Administrator</i>. All transportation expenses must be pre-approved. Only the expenses that are non-refundable on the day the Covered Cause for Interruption occurs are eligible for reimbursement, so contact <i>Our Administrator</i> immediately but no later than within 24 hours to discuss alternate travel arrangements.</p>

**Trip Cancellation /
Trip Interruption
Insurance**

SECTION 10 – HOW TO MAKE A CLAIM Once the Insured Person has cancelled his or her travel arrangements with the travel agent or other travel supplier, call the Administrator at the Customer Service phone number in section 11 to obtain a claim form. The Insured Person will be required to submit a completed claim form and provide documentation to substantiate the claim, including the following: • original invoice, original tickets (including any unused coupons), original vouchers, and original itinerary; • Your Account statement and any other documentation necessary to confirm that at least 75% of the costs of Eligible Expenses were charged to Your Account and/or using Your Aeroplan points; • proof that cancellation or interruption resulted from a Covered Cause for Cancellation or from Covered Cause for Interruption, as applicable. This may include a medical certificate, Physician’s written statement or death certificate, reports from police, Common Carrier or local authorities; and • where the claim relates to a Medical Covered Cause for Interruption or a Medical Covered Cause for Cancellation, a signed “Release of Medical Information” authorization to allow Us to obtain any further information required to complete the claim review. The Insured Person will also be required to provide evidence of his or her actual or planned departure date from his or her province or territory of residence.

Section 8 – How to Submit a Claim
IMPORTANT NOTE: *You* must report *Your* claim to *Our Administrator* immediately. *You* must provide completed claim form with required supporting documentation to *Our Administrator* as soon as possible, but no later than 1 year after the date it occurred.

Who to Contact to Submit a Claim
Once the *Insured Person* has cancelled or needs to interrupt their *Covered Trip* with the travel supplier, contact *Our Administrator* at 1-866-374-1129 (toll-free) from Canada or the U.S., or +1-416-977-4425 (collect) from other countries.

Complete the Required Form
1. Request the Form: To request a claim form, call *Our Administrator* at 1-866-374-1129 (toll-free) from 8 a.m. to 8 p.m. ET, Monday to Friday.
2. Time limit from date of event: If *You* are making a claim, *You* must send *Our Administrator* the appropriate claim forms, together with written proof of loss (e.g., original invoices and tickets, medical and/or death certificates) as soon as possible. In every case, *You* must submit *Your* completed claim form with required documentation within 1 year from the date of the accident or the date the claim arises. Failure to provide the applicable documentation may invalidate *Your* claim.

Provide the Information Requested
To make a Trip Cancellation or Trip Interruption claim, as part of the requirements above, under “Time limit from date of event,” *We* will need documentation to substantiate the claim, including but not limited to the following:

- a completed claim form;
- *Your Account* statement and any other documentation necessary to confirm that at least 75% of the costs of Eligible Expenses were charged to *Your Account* and/or using *Your Aeroplan Points*;
- a medical document, fully completed by the legally qualified *Physician* in active personal attendance and in the locality where the *Medical Emergency* occurred, stating the reason why travel was not recommended, the diagnosis and all dates of *Treatment*;
- written evidence of the covered cause of cancellation, interruption or delay;
- a travel supplier or tour operator terms and conditions detailing any cancellation penalties or reimbursement for unused travel arrangements;
- complete original unused transportation tickets and vouchers;
- reports from the police or local authorities documenting the cause of the missed connection;
- all receipts for the prepaid land arrangements as detailed in *Your* travel documents or itinerary prior to departure;
- all receipts for subsistence allowance expenses as approved by *Our Administrator*;
- original passenger receipts for new tickets;
- detailed invoices and/or receipts from the service provider(s);
- any receipts for or proof of refund already obtained from travel suppliers or tour operators;
- the *Insured Person* will also be required to provide evidence of their actual or planned *Departure Date* from their province or territory of residence;
- where the claim relates to a *Medical Condition*, a signed “Release of Medical Information” authorization to allow *Us* to obtain any further

Changes to your Certificate of Insurance, as of March 24, 2022

Benefit	Before	After
		<p>information required to complete the claim review.</p> <p>Note: If <i>Our Administrator</i> makes an advance payment for expenses that are later discovered to be ineligible under this <i>Certificate</i>, the <i>Insured Person</i> must reimburse <i>Us</i>.</p> <p>If You Report the Claim Immediately If <i>Our Administrator</i> guarantees or pays eligible expenses on behalf of an <i>Insured Person</i>, then <i>You</i> and, if applicable, the <i>Insured Person</i> must sign an authorization form allowing <i>Our Administrator</i> to recover those expenses:</p> <ul style="list-style-type: none"> • from any health plan or other insurance; and • through rights <i>You</i> may have against other insurers or other parties (see Section 10 – “General Conditions”, under “Right of Subrogation”). <p>If <i>Our Administrator</i> pays eligible expenses that are covered under other insurance or another plan, <i>You</i> and the <i>Insured Person</i> (if applicable) must help <i>Our Administrator</i> to seek reimbursement as required.</p> <p>The <i>Insured Person</i> must also provide evidence of the actual departure date from their province or territory of residence. If requested, an <i>Insured Person</i> must confirm any return dates to their province or territory of residence, including any return dates related to an interruption in a <i>Covered Trip</i>.</p> <p>Note: If <i>Our Administrator</i> makes an advance payment for expenses that are later discovered to be ineligible under this <i>Certificate</i>, the <i>Insured Person</i> must reimburse <i>Us</i>.</p> <p>If You Do Not Report the Claim Immediately It is important to cancel or interrupt <i>Your Covered Trip</i> immediately, but no later than 24 hours following the Covered Cause for Cancellation or interruption because the amount payable under this <i>Certificate</i> may be limited to any penalties imposed by <i>Your</i> travel provider(s) which are in effect on the date the Covered Cause for Cancellation or interruption occurs. If not, benefits will be limited as described under “Trip Cancellation and Trip Interruption Insurance Limitations and Exclusions”. Refer to Section 9 – “How to Contact <i>Our Administrator</i>” for information on how to get a claim form.</p> <p>What Claimant Can Expect from Insurer Once <i>We</i> have approved the claim, <i>We</i> will notify <i>You</i> and payment will be made within 60 days after receipt of the required claim forms, documentation and written proof of loss. If the claim has been denied, <i>We</i> will inform <i>You</i> of the claim denial reasons within 60 days after receipt of the required claim forms and written proof of loss.</p>
<p>Trip Cancellation / Trip Interruption Insurance</p>	<p>SECTION 11 – HOW TO CONTACT OUR ADMINISTRATOR 24 Hour Emergency Assistance Number To make arrangements with respect to Trip Interruption or Trip Cancellation, the <i>Insured Person</i> can call the <i>Administrator</i> twenty-four hours a day, seven days a <i>Week</i> at: From the U.S.A. or Canada 1-866-374-1129 From elsewhere, call collect (416) 977-4425 Customer Service: Phone number To enquire about these benefits, the <i>Insured Person</i> can call the <i>Administrator</i> at: 1-866-374-1129 or at (416) 977-4425 Monday – Saturday 8 a.m. – 8 p.m. Eastern Time</p>	<p>Section 9 – How to Contact Our Administrator 24-hour Emergency Assistance Number To enquire about these benefits, or to make arrangements with respect to Trip Cancellation and Trip Interruption Insurance, contact <i>Our Administrator</i> 24 hours a day, 7 days a week, at 1-866-374-1129 (toll-free) from Canada or the U.S., or +1-416-977-4425 (collect) from other countries. To request a claim form or for claims support, call <i>Our Administrator</i> at 1-866-374-1129 (toll-free) from 8 a.m. to 8 p.m. ET, Monday to Friday.</p>

<p>Trip Cancellation / Trip Interruption Insurance</p>	<p>SECTION 12 – GENERAL CONDITIONS Unless this <i>Certificate</i> or the Group Policy states otherwise, the following conditions apply to <i>Your</i> coverage: Proof of Loss The appropriate claims forms together with written proof of loss <i>must</i> be furnished as soon as reasonably possible, but in all events within one (1) year from the date on which the loss occurred. 42 Review and Medical Examination When a claim is being processed, <i>We</i> will have the right and the opportunity, at <i>Our</i> own expense, to review all medical records related to the claim and to examine the <i>Insured Person</i> medically when and as often as may be reasonably required. Subrogation There may be circumstances where another person or entity should have paid <i>You</i> for a loss but instead <i>We</i> paid <i>You</i> for the loss. If this occurs, <i>You</i> agree to co-operate with <i>Us</i> so <i>We</i> may demand payment from the person or entity who should have paid <i>You</i> for the loss. This may include: • transferring to <i>Us</i> the debt or obligation owing to <i>You</i> from the other person or entity; • permitting <i>Us</i> to bring a lawsuit in <i>Your</i> name; • if <i>You</i> receive funds from the other person or entity, <i>You</i> will hold it in trust for <i>Us</i>; • acting so as not to prejudice any of <i>Our</i> rights to collect payment from the other person or entity. <i>We</i> will pay the costs for the actions <i>We</i> take. Other Insurance All of <i>Our</i> policies are excess insurance, meaning that any other <i>sources</i> of recovery <i>You</i> have will pay first, and this insurance policy will be the last to pay. The total benefits payable under all <i>Your</i> insurance, including this <i>Certificate</i>, cannot be more than the actual expenses for a claim. If an <i>Insured Person</i> is also insured under any other insurance <i>Certificate</i> or policy, <i>We</i> will coordinate payment of benefits with the other insurer. Legal Action Limitation Period Every action or proceeding against the insurer for the recovery of insurance money payable under the contract is absolutely barred unless commenced within the time set out in the Insurance Act (for actions or proceedings governed by the laws of Alberta or British Columbia), The Insurance Act (for actions or proceedings governed by the laws of Manitoba), the Limitations Act, 2002 (for actions or proceedings governed by the laws of Ontario), the Civil Code of Quebec (for actions or proceedings governed by the laws of Quebec), or other applicable legislation. False Claim If <i>You</i> or an <i>Insured Person</i> makes a claim knowing it to be false or fraudulent in any respect, neither <i>You</i> nor the <i>Insured Person</i> will be entitled to the benefits of this coverage, nor to the payment of any claim under the Group Policies. Group Policies All benefits under this <i>Certificate</i> are subject in every respect to the Group Policies which alone constitute the agreements under which benefits will be provided. The Group Policies are issued to The Toronto-Dominion Bank (the “<i>Bank</i>”). The principal provisions of the Group Policies affecting <i>Insured Persons</i> are</p>	<p>Section 10 – General Conditions Unless this <i>Certificate</i> or the Group Policy states otherwise, the following conditions apply to <i>Your</i> coverage:</p> <p>Access to Medical Care <i>We</i> and/or <i>Our Administrator</i> will assist <i>You</i> to access care whenever possible, however will not be responsible for the availability, quality or results of any medical <i>Treatment</i>, care or transport, or for the failure of any <i>Insured Person</i> to obtain <i>Treatment</i>.</p> <p>Benefit Payments This <i>Certificate</i> contains provisions removing or restricting the right of the <i>Insured Person</i> to designate persons to whom or for whose benefit money is to be payable. This means that under the Group Policy, neither <i>You</i> nor any <i>Insured Person</i> has the right to choose a beneficiary who will receive any benefits payable under this <i>Certificate</i>. Benefits are payable to <i>You</i> or, on <i>Your</i> behalf, to <i>Your</i> medical service provider.</p> <p>Currency All amounts shown are in Canadian currency.</p> <p>Group Policy All benefits under this <i>Certificate</i> are subject in every respect to the Group Policy, which alone constitutes the agreement under which benefits will be provided. The principal provisions of the Group Policy affecting <i>Insured Persons</i> are summarized in this <i>Certificate</i>. The Group Policy is on file at the office of the Policyholder and upon request, <i>You</i> are entitled to receive and examine a copy of the Group Policy.</p> <p>Legal Action Limitation Period Every action or proceeding against the Insurer for the recovery of insurance money payable under the contract is absolutely barred unless commenced within the time set out in the <i>Insurance Act</i> (for actions or proceedings governed by the laws of Alberta or British Columbia), <i>The Insurance Act</i> (for actions or proceedings governed by the laws of Manitoba), the <i>Limitations Act</i>, 2002 (for actions or proceedings governed by the laws of Ontario), or other applicable legislation. For actions or proceedings governed by the laws of Quebec, the prescriptive period is set out in the <i>Civil Code of Quebec</i>.</p> <p>Other insurance All of <i>Our</i> coverages are excess insurance, meaning that any other <i>sources</i> of recovery <i>You</i> have will pay first, and this insurance coverage will be the last to pay. The total benefits payable under all <i>Your</i> insurance, including this <i>Certificate</i>, cannot be more than the actual expenses for a claim. If an <i>Insured Person</i> is also insured under any other insurance certificate or policy, <i>We</i> will coordinate payment of benefits with the other insurer.</p> <p>Recovery In the event that <i>You</i> are found to be ineligible for coverage, or that a claim is found to be invalid, or benefits are reduced in accordance with any policy exclusion or term or condition, <i>We</i> have the right to collect from <i>You</i> any amount which <i>We</i> have paid on <i>Your</i> behalf to service providers or other parties.</p> <p>Relationship between Us and the Group Policyholder TD Life Insurance Company and TD Home and Auto Insurance Company are affiliated with The Toronto-Dominion Bank (“<i>TD Bank</i>”).</p> <p>Review and Medical Examination When a claim is being processed, <i>We</i> will have the right and the opportunity, at <i>Our</i> own expense, to review all medical records related to</p>
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Changes to your Certificate of Insurance, as of March 24, 2022

Benefit	Before	After
	summarized in this <i>Certificate</i> . The Group Policies are on file at the office of the <i>Bank</i> .	<p>the claim and to examine the <i>Insured Person</i> medically when and as often as may be reasonably required.</p> <p>Right of Subrogation There may be circumstances where another person or entity should have paid <i>You</i> for a loss but instead <i>We</i> paid <i>You</i> for the loss. If this occurs, <i>You</i> agree to cooperate with <i>Us</i> so <i>We</i> may demand payment from the person or entity who should have paid <i>You</i> for the loss. This may include:</p> <ul style="list-style-type: none"> • transferring to <i>Us</i> the debt or obligation owing to <i>You</i> from the other person or entity; or • permitting <i>Us</i> to bring a lawsuit in <i>Your</i> name; or • if <i>You</i> receive funds from the other person or entity, <i>You</i> will hold it in trust for <i>Us</i>; or • acting so as not to prejudice any of <i>Our</i> rights to collect payment from the other person or entity. <p><i>We</i> will pay the costs for the actions <i>We</i> take.</p>
Common Carrier Travel Accident Insurance	Coverage under this <i>Certificate</i> is provided by: TD Life Insurance Company (Insurer) 320 Front Street West, 3rd Floor, Toronto, ON M5V 3B6	Coverage under this <i>Certificate</i> is provided by: TD Life Insurance Company (Insurer) P.O. Box 1, TD Centre, Toronto, ON M5K 1A2
Common Carrier Travel Accident Insurance	Administration services are provided by: Allianz Global Assistance (<i>Administrator</i>) P.O. Box 277, Waterloo, ON N2J 4A4 Phone: 1-866-374-1129 or (416) 977-4425	Claims administration and adjudication services are provided by: Global Excel Management Inc. (<i>Administrator</i>) 73 Queen Street, Sherbrooke, QC J1M 0C9 Phone: 1-866-374-1129 or +1-416-977-4425
Common Carrier Travel Accident Insurance	The <i>Certificate</i> of Insurance below applies to the TD Aeroplan Visa Infinite Privilege Card which will be referred to as a "TD Credit Card" throughout the <i>Certificate</i> : <i>Certificate</i> of Insurance TD Life Insurance Company ("TD Life") provides the insurance for this <i>Certificate</i> under Master Policy #TGV009 (the "Policy") issued to The Toronto Dominion <i>Bank</i> . This Insurance is administered by Allianz Global Assistance ("Allianz") through the Operations Centre. Allianz administers the insurance on behalf of TD Life, and provides claims assistance, claims payment and administrative services under the Policy. This <i>Certificate</i> contains a clause which may limit the amount payable. Words in italics in this <i>Certificate</i> are defined in section 1.	Section 1 – Introduction Certificate of Insurance Claims administration and adjudication services are provided by Global Excel Management Inc. The <i>Certificate</i> applies to the TD Aeroplan Visa Infinite Privilege Card, which will be referred to as a "TD Credit Card" throughout the <i>Certificate</i> . TD Life Insurance Company ("TD Life") provides the insurance for this <i>Certificate</i> under Master Policy #TGV009 (the "Policy") issued to The Toronto-Dominion Bank. This <i>Certificate</i> contains a clause which may limit the amount payable.

<p>Common Carrier Travel Accident Insurance</p>	<p>Section 1 – Definitions ACCIDENTAL BODILY INJURY(IES) means bodily injury which is accidental, is the direct <i>source</i> of a Loss, is independent of disease, illness or other cause and occurs while this Policy is in force. ACCOUNT means <i>Your</i> TD Credit Card <i>Account</i> accessed <i>Using Your</i> TD Credit Card or TD Visa Cheque. ACCOUNT HOLDER means the <i>Primary Cardholder</i> to whom the monthly <i>Account</i> statement is issued, and who is a resident of Canada and any <i>Additional Cardholder</i> who is a resident of Canada. The <i>Account Holder</i> may be referred to herein <i>Using “You”</i> and <i>“Your”</i> ADDITIONAL CARDHOLDER means a person to whom a TD Credit Card has been issued at the authorization of the Primary Cardholder. COMA means a profound state of unconsciousness from which the <i>Insured Person</i> cannot be aroused to consciousness even by powerful stimulation, as determined by a <i>Physician</i>. (Note: <i>Coma</i> benefits are available only to Dependent Children.) COMMON CARRIER means any licensed land, water or air conveyance operated by those whose occupation or business is transportation of persons or things without discrimination for hire. Should a <i>Common Carrier</i> be delayed or rerouted, such that the carrier is required to arrange alternate transportation for its passengers, the definition of <i>Common Carrier</i> will extend to whatever conveyance is <i>Used</i> for this purpose. Such alternate transportation need not be charged to <i>Your Account</i> for coverage to be in effect. Common Carrier is extended to include any Airline having a Charter Air Carrier’s License or its equivalent, provided it maintains regularly scheduled flights and publishes timetables and fares consistent with Scheduled Airline practices and provided the aircraft is limited to fixed-wing turbo-prop or jet Aircraft. Rafts, amusement park rides, jet skis, balloons, ski lifts and hang-gliders are not considered to be a Common Carrier. COVERED TRIP means travel on a Common Carrier, the fare for which is fully charged to <i>Your Account</i>, or paid for either in full or partially <i>Using Your Aeroplan Points</i>. If <i>Your Aeroplan Points</i> have only partially paid for <i>Your Common Carrier</i> fare, the balance of that fare must be fully charged to <i>Your Account</i>. DEPENDENT CHILD(REN) means those children residing with the <i>Account Holder</i>, under the age of twenty-one (21) and unmarried, who are primarily dependent upon the <i>Account Holder</i> for maintenance and support. <i>Dependent Children</i> also means children beyond the age of twenty-one (21) and unmarried, who are permanently, mentally and physically challenged and incapable of self-support. Also included in the definition of <i>Dependent Children</i> are the <i>Account Holder’s Dependent Children</i> under the age of twenty-five (25) and unmarried, who are classified as full-time students at an institution of higher</p>	<p>Section 3 – Definitions In this <i>Certificate</i>, the following words and phrases shown in italics and capitalized have the meanings shown below. As <i>You</i> read through the <i>Certificate</i>, <i>You</i> may need to refer to this Section to ensure <i>You</i> have a full understanding of <i>Your</i> coverage, limitations and exclusions. Accidental Bodily Injury means bodily injury, which is accidental, is the direct source of a Loss, is independent of disease, illness or other cause and occurs while this Policy is in force. Account means the <i>Primary Cardholder’s</i> TD Credit Card Account that the <i>Bank</i> maintains. Account Holder means the <i>Primary Cardholder</i> to whom the monthly <i>Account</i> statement is issued, and who is a resident of Canada and any <i>Additional Cardholder</i> who is a resident of Canada. The <i>Account Holder</i> may be referred to herein using <i>“You”</i> and <i>“Your”</i>. Additional Cardholder means a person to whom a TD Credit Card has been issued at the authorization of the <i>Primary Cardholder</i>. Aeroplan Points mean the points awarded through the Aeroplan program which can be redeemed for rewards. <i>Aeroplan Points</i> have no monetary value. Certificate means this Certificate of Insurance. Bank means the Toronto-Dominion Bank. Coma means a profound state of unconsciousness from which the <i>Insured Person</i> cannot be aroused to consciousness even by powerful stimulation, as determined by a physician. (Note: <i>Coma</i> benefits are available only to <i>Dependent Children</i>.) Common Carrier means any licensed land, water or air conveyance operated by those whose occupation or business is transportation of persons or things without discrimination for hire. <i>Common Carrier</i> is extended to include any airline having a Charter Air Carrier’s Licence or its equivalent, provided it maintains regularly scheduled flights and publishes timetables and fares consistent with scheduled airline practices and provided the aircraft is limited to fixed-wing turbo-prop or jet aircraft. Rafts, amusement park rides, jet skis, balloons, ski lifts and hang-gliders are not considered to be a <i>Common Carrier</i>. Covered Trip means travel on a <i>Common Carrier</i>, the fare for which is fully charged to <i>Your Account</i>, or paid for either in full or partially using <i>Your Aeroplan Points</i>. If <i>Your Aeroplan Points</i> have only partially paid for <i>Your Common Carrier</i> fare, the balance of that fare must be fully charged to <i>Your Account</i>. Dependent Child(ren) mean(s) <i>Your</i> natural, adopted, or stepchildren who are: <ul style="list-style-type: none"> • unmarried; and • dependent on <i>You</i> for financial maintenance and support; and <ul style="list-style-type: none"> • under 21 years of age; or • under 25 years of age and attending an institution of higher learning, full time, in Canada; or • mentally or physically handicapped. Good Standing means: <ul style="list-style-type: none"> • the <i>Primary Cardholder</i> has applied for the <i>Account</i>; • the <i>Bank</i> has approved and opened the <i>Account</i>; • the <i>Primary Cardholder</i> has not advised the <i>Bank</i> to close the <i>Account</i>; and • the <i>Bank</i> has not suspended or revoked credit privileges or otherwise closed the <i>Account</i>. </p>
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Changes to your Certificate of Insurance, as of March 24, 2022

Benefit	Before	After
	<p>learning. IMMEDIATE FAMILY MEMBER means the <i>Spouse</i>, parents, grandparents, children age eighteen (18) and over, brother or sister of the Insured Person. INSURED PERSON means the <i>Account Holder</i>, as Well as the <i>Account Holder's Spouse</i> and <i>Dependent Children</i> whose name is on a <i>Ticket</i> or a rental agreement. LOSS means the types of <i>Accidental Bodily Injuries</i> listed in section 4 and for which this insurance provides coverage.</p> <p>PRIMARY CARDHOLDER means a person who applied for a TD Credit Card <i>Account</i>, whose name is on the <i>Account</i> and to whom a TD Credit Card has been issued.</p> <p>PERMANENT TOTAL DISABILITY means that the <i>Accidental Bodily Injuries</i> sustained in a covered accident solely and directly: 1) prevent the <i>Insured Person</i> from performing all the substantial and material duties of the <i>Insured Person's</i> occupation; and 2) causes a condition which is medically determined, by a <i>Physician</i> approved by Allianz, to be of continuous and indefinite duration; and 3) require the continuous care of a <i>Physician</i>, unless the <i>Insured Person</i> has reached his/her maximum point of recovery; and 4) prevent the <i>Insured Person</i> from engaging in any gainful occupation for which the <i>Insured Person</i> is qualified, or could be qualified, by reason of education, training, experience, or skill. The <i>Permanent Total Disability</i> must have existed for twelve (12) consecutive months. (Note: <i>Permanent Total Disability</i> benefits are not available to <i>Dependent Children</i>.)</p> <p>RENTAL CAR means a <i>four-wheel</i> private passenger motor vehicle designed for travel on public roads and rented from a licensed rental company for no more than forty-eight (48) consecutive days. It does not include trucks, trailers, campers, recreational vehicles or motor vehicles propelling or towing a trailer or any other object, off-road vehicles (meaning any vehicle <i>Used</i> on roads that are not publicly maintained), vans, or mini vans that are manufactured to seat more than eight (8) occupants (including the driver) or when the vehicle is <i>Used</i> to carry, haul or transport any type of cargo or property or passengers for hire.</p> <p>SPOUSE means either a person to whom the <i>Account Holder</i> is lawfully married, or the common-law <i>Spouse</i> of an <i>Account Holder</i>. Common-law <i>Spouse</i> shall mean a person (of the same or opposite sex) who has been living with the <i>Account Holder</i> continuously for at least one year and is publicly represented as the <i>Account Holder's</i> partner.</p>	<p>Immediate Family Member means the <i>Spouse</i>, parents, grandparents, children age 18 and over, brother or sister of the <i>Insured Person</i>.</p> <p>Insured Person means the <i>Account Holder</i>, as well as the <i>Account Holder's Spouse</i> and <i>Dependent Children</i> whose name is on a ticket or a rental agreement.</p> <p>Loss means the types of <i>Accidental Bodily Injuries</i> for which this insurance provides coverage.</p> <p>Primary Cardholder means a person who applied for a TD Credit Card, whose name is on the <i>Account</i> and to whom a TD Credit Card has been issued. A <i>Primary Cardholder</i> does not include an <i>Additional Cardholder</i>.</p> <p>Permanent Total Disability means that the <i>Accidental Bodily Injuries</i> sustained in a covered accident solely and directly:</p> <ul style="list-style-type: none"> • prevent the <i>Insured Person</i> from performing all the substantial and material duties of the <i>Insured Person's</i> occupation; and • cause a condition which is medically determined, by a physician approved by <i>Our Administrator</i>, to be of continuous and indefinite duration; and • require the continuous care of a physician, unless the <i>Insured Person</i> has reached their maximum point of recovery; and • prevent the <i>Insured Person</i> from engaging in any gainful occupation for which the <i>Insured Person</i> is qualified, or could be qualified, by reason of education, training, experience, or skill. <p>The <i>Permanent Total Disability</i> must have existed for 12 consecutive months. (Note: <i>Permanent Total Disability</i> benefits are not available to <i>Dependent Children</i>.)</p> <p>Rental Car means a four-wheel private passenger motor vehicle designed for travel on public roads and rented from a licensed rental company for no more than 48 consecutive days. It does not include trucks, trailers, campers, recreational vehicles or motor vehicles propelling or towing a trailer or any other object, off-road vehicles (meaning any vehicle used on roads that are not publicly maintained), vans, or minivans that are manufactured to seat more than 8 occupants (including the driver) or when the vehicle is used to carry, haul or transport any type of cargo or property or passengers for hire.</p> <p>Spouse means:</p> <ul style="list-style-type: none"> • The person who the <i>Account Holder</i> is legally married to; or • the person the <i>Account Holder</i> has lived with for at least 1 continuous year in the same household and publicly refers to as their partner. <p>We, Us and Our mean TD Life Insurance Company.</p>

Changes to your Certificate of Insurance, as of March 24, 2022

Benefit	Before	After
<p>Common Carrier Travel Accident Insurance</p>	<p>Section 2 – <i>Common Carrier Accident Coverage</i> Benefits will be paid as specified in the Schedule of Benefits below if an <i>Insured Person</i> suffers a Loss arising from and occurring on a <i>Covered Trip</i> while the <i>Insured Person</i> is: 45 1) riding as a passenger in or entering or exiting any <i>Common Carrier</i>; or 2) at the airport, terminal or station, at the beginning or end of the <i>Covered Trip</i>. If the purchase of the <i>Common Carrier</i> passage fare is not made prior to the <i>Insured Person's</i> arrival at the airport, terminal or station, coverage begins at the time the entire <i>Common Carrier</i> passage fare is charged to the <i>Insured Person's Account</i>. Coverage includes circumstances arising from and occurring on a <i>Covered Trip</i> while the <i>Insured Person</i> is riding as a passenger in, entering or exiting any <i>Common Carrier</i>, while travelling directly to or from the airport, terminal, or station; 1) immediately preceding the departure of the scheduled <i>Common Carrier</i> conveyance on which the <i>Insured Person</i> has purchased passage; and 2) immediately following the arrival of the scheduled <i>Common Carrier</i> conveyance on which the <i>Insured Person</i> was a passenger.</p>	<p>Section 4 – Common Carrier Accident Coverage Benefits will be paid as specified in the Schedule of Benefits below if an <i>Insured Person</i> suffers a Loss arising from and occurring on a <i>Covered Trip</i> while the <i>Insured Person</i> is: 1. riding as a passenger in or entering or exiting any <i>Common Carrier</i>; or 2. at the airport, terminal or station, at the beginning or end of the <i>Covered Trip</i>. If the purchase of the <i>Common Carrier</i> passage fare is not made prior to the <i>Insured Person's</i> arrival at the airport, terminal or station, coverage begins at the time the entire <i>Common Carrier</i> passage fare is charged to the <i>Insured Person's Account</i>. Coverage includes circumstances arising from and occurring on a <i>Covered Trip</i> while the <i>Insured Person</i> is riding as a passenger in, entering or exiting any <i>Common Carrier</i>, while travelling directly to or from the airport, terminal, or station: 1. immediately preceding the departure of the scheduled <i>Common Carrier</i> conveyance on which the <i>Insured Person</i> has purchased passage; and 2. immediately following the arrival of the scheduled <i>Common Carrier</i> conveyance on which the <i>Insured Person</i> was a passenger.</p>
<p>Common Carrier Travel Accident Insurance</p>	<p>Section 3 – <i>Rental Car Accident Coverage</i> Benefits will be paid as specified in the Schedule of Benefits below if an <i>Insured Person</i> suffers a Loss while operating or riding as a passenger in, or boarding or alighting from any <i>Rental Car</i> provided that: (a) the cost of the <i>Rental Car</i> was fully charged to <i>Your Account</i>, or paid either in full or partially <i>Using Your Aeroplan Points</i>. If <i>Your Aeroplan Points</i> have only partially paid for the cost of <i>Your Rental Car</i>, the balance of that cost must be fully charged to <i>Your Account</i>, and (b) there has been no violation of the rental agreement by the <i>Account Holder</i>; and (c) the driver of the rented automobile is not legally intoxicated nor under influence of any narcotic unless prescribed by a licensed <i>Physician</i>. The maximum benefit payable for any one <i>Rental Car Accident</i> is \$2,000,000 in total</p>	<p>Section 5 – Rental Car Accident Coverage No change</p>

<p>Common Carrier Travel Accident Insurance</p>	<p>Section 4 – Schedule of Benefits and Important Conditions If an <i>Insured Person</i> has multiple Losses as the result of one accident, only the single largest benefit amount applicable to the Loss suffered is payable. The following benefits are provided if the Loss occurs as a result of an accident within one year from the date of the accident: A. Accidental Death or Dismemberment, Loss of Sight, Speech or Hearing and Paralysis Benefits Accidental Loss of Benefit Amount Life \$500,000 Speech and Hearing \$500,000 Both Hands or Both Feet or Sight of Both Eyes or a Combination \$500,000 of a Hand, a Foot or Sight of One Eye One Arm or One Leg \$375,000 One Hand or One Foot or Sight of One Eye \$333,350 Speech or Hearing \$333,350 Thumb and Index Finger of the same Hand \$166,650 46 Paralysis Quadriplegia (complete paralysis of both upper and lower limbs) \$500,000 Paraplegia (complete paralysis of both lower limbs) \$500,000 Hemiplegia (complete paralysis of upper and lower limbs of \$500,000 one side of body) “Loss” with reference to hand or foot means complete severance through or above the knuckle joint of at least <i>four</i> fingers of the same hand or three fingers and a thumb of the same hand or the ankle joint; with reference to arm or leg means complete severance through or above the elbow or knee joint; with reference to sight of an eye means the permanent loss of vision in one eye; and with reference to thumb and index finger means complete severance through or above the knuckle joints of the thumb and index finger. “Loss” with reference to speech means the permanent and irrecoverable loss of the capability of speech without the aid of mechanical devices; with reference to hearing means the permanent and irrecoverable loss of hearing in both ears. “Paralysis” means complete and irreversible loss of all motion of all practical Use of an arm or leg provided the loss is continuous for twelve (12) consecutive months. B. <i>Permanent Total Disability</i> and <i>Coma</i> Benefits Loss Benefit Amount <i>Permanent Total Disability</i> \$500,000 <i>Coma</i> \$500,000 (i) <i>Permanent Total Disability</i> benefits are available only to <i>You</i> and <i>Your Spouse</i> . Benefit amount (less any amount paid under sections 4(A) and (B) is payable if an <i>Insured Person</i> sustains <i>Permanent Total Disability</i> within three hundred and sixty-five (365) days after the date of the accident and the <i>Permanent Total Disability</i> continues for twelve (12) consecutive months. (ii) <i>Coma</i> benefits are available only to <i>Your Dependent Child(ren)</i>. An elimination period of thirty-one (31) days applies, which commences on the date the <i>Dependent Child(ren)</i> enter into a <i>Coma</i>. <i>Coma</i> benefits are not payable, nor do they accrue, during an elimination period. The <i>Coma</i> benefit amount is payable monthly at a rate of 1% of the benefit amount shown above until the earliest of: 1) the date the</p>	<p>Section 6 – Schedule of Benefits and Important Conditions</p> <p>No change</p>
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Changes to your Certificate of Insurance, as of March 24, 2022

Benefit	Before	After
	<p>Dependent Child dies; 2) the date the Dependent Child is no longer in a <i>Coma</i>; or 3) total payments equal the <i>Coma</i> benefit amount shown above. If the Dependent Child dies as a result of the accident during the period for which this <i>Coma</i> benefit is payable, <i>We</i> will pay a lump sum equal to the Dependent Child's loss of life benefit amount, less <i>Coma</i> benefit amounts already paid. C. Exposure and Disappearance (i) When by reason of an accident described in section 2, the <i>Insured Person</i> is unavoidably exposed to the elements and as a result of such exposure suffers a Loss, the amount set out in the Schedule of Benefits shall be paid. (ii) If the <i>Insured Person</i> has not been found within one (1) year of the disappearance, stranding, sinking, wrecking or breakdown of a <i>Common Carrier</i> in which the <i>Insured Person</i> was covered as an occupant, it will be assumed that the <i>Insured Person</i> has suffered a loss of life.</p>	

Changes to your Certificate of Insurance, as of March 24, 2022

Benefit	Before	After
Common Carrier Travel Accident Insurance	<p>Section 5 – Special Benefits A. Family Transportation Benefit (i) When an <i>Insured Person</i> is confined as an in-patient in a <i>Hospital</i> due to Accidental Bodily Injuries that result in a Loss, TD Life will pay for the expenses incurred to transport an <i>Immediate Family Member</i> of the <i>Insured Person</i> to the <i>Hospital</i> . Such personal attendance must be recommended by an attending <i>Physician</i>, and such transportation must be via <i>Common Carrier</i> on the most direct route available. (ii) When an <i>Insured Person’s</i> loss of life results in a loss of life benefit amount being payable, TD Life will pay for the expenses incurred by an <i>Immediate Family Member</i> of the <i>Insured Person</i> for transportation to the place where the <i>Insured Person’s</i> body is located for the purpose of identifying the <i>Insured Person’s</i> body. Such transportation must be via <i>Common Carrier</i> on the most direct route available. The maximum Family Transportation Benefit payable is \$5,000 per <i>Insured Person</i> who is <i>Hospitalized</i> as described above. B. Repatriation Benefit When Accidental Bodily Injuries result in a loss of life benefit amount being payable, and the loss of life occurs at least 100 kilometers from the <i>Insured Person’s</i> permanent city of residence, TD Life will pay for the cost of preparation and transportation of <i>Insured Person’s</i> body to such place of residence. The maximum Repatriation Benefit payable is \$10,000 per loss of life. C. Rehabilitation Benefit When <i>Accidental Bodily Injury</i> results in a Loss, an additional amount will be paid for covered Rehabilitation expenses. Covered expenses are the reasonable and necessary expenses actually incurred up to a maximum of \$10,000 for <i>Treatment</i> by a therapist or confinement in an institution of an <i>Insured Person</i> provided: (i) such <i>Treatment</i> is required in order to retrain the <i>Insured Person</i> for work in any gainful occupation, including the <i>Insured Person’s</i> regular occupation; and (ii) expenses are incurred within two (2) years from th</p>	<p>Section 7 – Special Benefits</p> <p>No change</p>

Changes to your Certificate of Insurance, as of March 24, 2022

Benefit	Before	After
Common Carrier Travel Accident Insurance	<p>Section 6 – Payment of Benefits The loss of life benefit of an <i>Account Holder</i> will be paid to the designated beneficiary. This choice must be in writing and filed with Allianz. All other benefit amounts for Losses suffered by the <i>Account Holder</i> are paid to the <i>Account Holder</i>. The loss of life benefit of a <i>Spouse</i> or <i>Dependent Child</i> will be paid to the <i>Account Holder</i>, if living, otherwise to the designated beneficiary. This choice must be in writing and filed with Allianz. All other benefit amounts for Losses suffered by the <i>Spouse</i> or <i>Dependent Child</i> are paid to the <i>Spouse</i> or <i>Dependent Child</i>, except that any amount payable for Losses sustained by a minor will be paid to the minor’s legal guardian. If the <i>Insured Person</i> has not chosen a beneficiary, or if there is no beneficiary alive when the <i>Insured Person</i> dies, TD Life will pay the benefit amount to the <i>Account Holder’s</i> estate.</p>	<p>Section 8 – Payment of Benefits</p> <p>The <i>Loss</i> of life benefit of an <i>Account Holder</i> will be paid to the designated beneficiary. This choice must be in writing and filed with <i>Our Administrator</i>. All other benefit amounts for <i>Losses</i> suffered by the <i>Account Holder</i> are paid to the <i>Account Holder</i>. The <i>Loss</i> of life benefit of a <i>Spouse</i> or <i>Dependent Child</i> will be paid to the <i>Account Holder</i>, if living, otherwise to the designated beneficiary. This choice must be in writing and filed with <i>Our Administrator</i>. All other benefit amounts for <i>Losses</i> suffered by the <i>Spouse</i> or <i>Dependent Child</i> are paid to the <i>Spouse</i> or <i>Dependent Child</i>, except that any amount payable for <i>Losses</i> sustained by a minor will be paid to the minor’s legal guardian. If the <i>Insured Person</i> has not chosen a beneficiary, or if there is no beneficiary alive when the <i>Insured Person</i> dies, TD Life will pay the benefit amount to the <i>Account Holder’s</i> estate.</p>
Common Carrier Travel Accident Insurance	<p>Section 7 – Exclusions This Policy does not cover <i>Loss</i> caused by or resulting from any of the following: a) <i>Loss</i> occurring while the employee is in, entering or exiting any aircraft while acting or training as a pilot or crew member. 48 b) <i>Loss</i> resulting from suicide, attempted suicide or <i>loss</i> that is intentionally self-inflicted. c) <i>Loss</i> caused by or resulting from a declared or undeclared war, but war does not include acts of terrorism. d) <i>Loss</i> caused by bacterial infection except bacterial infection of an <i>Accidental Bodily Injury</i>, or if death results from the accidental ingestion of a substance contaminated by bacteria.</p>	<p>Section 9 – Exclusions</p> <p>This Policy does not cover <i>Loss</i> caused by or resulting from any of the following:</p> <p>a) <i>Loss</i> occurring while the employee is in, entering or exiting any aircraft while acting or training as a pilot or crew member.</p> <p>b) <i>Loss</i> resulting from suicide, attempted suicide or <i>Loss</i> that is intentionally self-inflicted.</p> <p>c) <i>Loss</i> caused by bacterial infection except bacterial infection of an <i>Accidental Bodily Injury</i>, or if death results from the accidental ingestion of a substance contaminated by bacteria.</p> <p>d) <i>Loss</i> caused by or resulting from:</p> <ul style="list-style-type: none"> • an act of war, whether declared or undeclared; or • hostile or warlike action in time of peace or war; or • willing participation in a war, riot or civil unrest; or • rebellion; or • revolution; or • insurrection; or • any service in the armed forces while on duty.

Changes to your Certificate of Insurance, as of March 24, 2022

Benefit	Before	After
Common Carrier Travel Accident Insurance	<p>Section 8 – Making a Claim Written Notice of Claim must be given to Allianz, P.O. Box 277, Waterloo, Ontario, N2J 4A4 within thirty (30) days after the occurrence or commencement of any Loss covered by this Policy or as soon as reasonably possible. Notice must include enough information to identify the <i>Insured Person</i> and <i>Account</i>. Failure to give Notice of Claim within thirty (30) days will not invalidate or reduce any claim if notice is given as soon as reasonably possible. Written Proof of Loss must be given to Allianz within ninety (90) days after the date of Loss, or as soon as reasonably possible. At the time of a claim, Allianz is available to assist <i>You</i> or <i>Your</i> representative in obtaining and completing the necessary claim forms. Call 1-866-374-1129.</p>	<p>Section 10 – How to Submit a Claim IMPORTANT NOTE: <i>You</i> must report <i>Your</i> claim to <i>Our Administrator</i> within 30 days after the date of the occurrence of commencement of any <i>Loss</i> covered by this <i>Certificate</i> or as soon as reasonably possible. <i>You</i> must provide completed claim form with required supporting documentation to <i>Our Administrator</i> as soon as possible, but no later than 90 days after the date of <i>Loss</i>.</p> <p>Who to Contact to Submit a Claim To submit a claim, please contact <i>Our Administrator</i> at 1-866-374-1129 (toll-free) from Canada or the U.S., or +1-416-977-4425 (collect) from other countries.</p> <p>Complete the Required Form 1) Request the Form: To request a claim form, call <i>Our Administrator</i> at 1-866-374-1129 (toll-free) from 8 a.m. to 8 p.m. ET, Monday to Friday. 2) Time limit from date of event: If <i>You</i> are making a claim, <i>You</i> must report <i>Your</i> claim to <i>Our Administrator</i> within 30 days after the date of <i>Loss</i>. <i>You</i> must send <i>Our Administrator</i> the appropriate claim forms, together with written proof of <i>Loss</i> (e.g., original invoices and tickets, medical and/or death certificates) as soon as possible, but no later than 90 days after the date of <i>Loss</i>. Failure to provide the applicable documentation may invalidate <i>Your</i> claim.</p>
Common Carrier Travel Accident Insurance	<p>Section 9 – Individual Termination of Insurance The insurance coverage of any <i>Insured Person</i> shall terminate on the earliest of the following: a) the date the Policy is terminated b) the expiration of the Policy term for which premium has been paid c) the date the <i>Account Holder's Account</i> is cancelled or his or her <i>Account</i> privileges are terminated</p>	<p>Section 11 – When <i>Your</i> Coverage Terminates The insurance coverage of any <i>Insured Person</i> shall terminate on the earliest of the following: a) the date the Policy is terminated; b) the expiration of the Policy term for which premium has been paid; c) the date the <i>Account Holder's Account</i> is cancelled or their <i>Account</i> privileges are terminated.</p>

Changes to your Certificate of Insurance, as of March 24, 2022

Benefit	Before	After
Common Carrier Travel Accident Insurance	<p>Section 10 – General Conditions LEGAL ACTION LIMITATION PERIOD: Every action or proceeding against the insurer for the recovery of insurance money payable under the contract is absolutely barred unless commenced within the time set out in the Insurance Act (for actions or proceedings governed by the laws of Alberta or British Columbia), The Insurance Act (for actions or proceedings governed by the laws of Manitoba), the Limitations Act, 2002 (for actions or proceedings governed by the laws of Ontario), the Civil Code of Quebec (for actions or proceedings governed by the laws of Quebec), or other applicable legislation.</p> <p>CONFORMANCE WITH STATUTES: Any terms of this Policy which are in conflict with the applicable statutes, laws or regulations of the province or territory in which this Policy is issued are amended to conform to such statutes.</p> <p>PHYSICAL EXAMINATION AND AUTOPSY: Allianz has the right to have the <i>Insured Person</i> examined by a <i>Physician</i> approved by Allianz, as often as reasonably necessary while a claim is pending. Allianz may also have an autopsy done, unless prohibited by law. Any examinations or autopsies that <i>We</i> require will be done at Allianz’s expense and by a <i>Physician</i>.</p> <p>MASTER POLICY: This <i>Certificate</i> is a description of coverage provided by Policy #TGV009 issued to The Toronto-Dominion Bank. All terms and conditions of the Policy govern. In no event does possession of multiple <i>Certificates</i> or TD Credit Cards entitle an <i>Insured Person</i> to benefits in excess of those described herein for any Loss sustained.</p>	<p>Section 12 – General Conditions Conformance with Statutes</p> <p>Any terms of this Policy which are in conflict with the applicable statutes, laws or regulations of the province or territory in which this Policy is issued are amended to conform to such statutes.</p> <p>Group Policy</p> <p>This <i>Certificate</i> is a description of coverage provided by Policy #TGV009 issued to The Toronto-Dominion Bank. All terms and conditions of the Policy govern. In no event does possession of multiple certificates or TD Credit Cards entitle an <i>Insured Person</i> to benefits in excess of those described herein for any Loss sustained.</p> <p>Legal Action Limitation Period</p> <p>Every action or proceeding against the Insurer for the recovery of insurance money payable under the contract is absolutely barred unless commenced within the time set out in the <i>Insurance Act</i> (for actions or proceedings governed by the laws of Alberta or British Columbia), <i>The Insurance Act</i> (for actions or proceedings governed by the laws of Manitoba), the <i>Limitations Act</i>, 2002 (for actions or proceedings governed by the laws of Ontario), or other applicable legislation. For actions or proceedings governed by the laws of Quebec, the prescriptive period is set out in the <i>Civil Code of Quebec</i>.</p> <p>Physical Examination and Autopsy</p> <p><i>Our Administrator</i> has the right to have the <i>Insured Person</i> examined by a physician approved by <i>Our Administrator</i>, as often as reasonably necessary while a claim is pending. <i>Our Administrator</i> may also have an autopsy done, unless prohibited by law. Any examinations or autopsies that we require will be done at <i>Our Administrator’s</i> expense and by a physician.</p>
Delayed and Lost Baggage Insurance	<p>Coverage under this <i>Certificate</i> is provided by: TD Home and Auto Insurance Company (Insurer) 320 Front Street West, 3rd Floor, Toronto, ON M5V 3B6</p>	<p>Coverage under this Certificate is provided by:</p> <p>TD Home and Auto Insurance Company (“Insurer”) P.O. Box 1, TD Centre, Toronto, ON M5K 1A2</p>
Delayed and Lost Baggage Insurance	<p>Administration services are provided by: Allianz Global Assistance (<i>Administrator</i>) P.O. Box 277, Waterloo, ON N2J 4A4 Phone: 1-866-374-1129 or (416) 977-4425</p>	<p>Claims administration and adjudication services are provided by:</p> <p>Global Excel Management Inc. (“Administrator”) 73 Queen Street, Sherbrooke, QC J1M 0C9 Phone: 1-866-374-1129 or +1-416-977-4425</p>
Delayed and Lost Baggage Insurance	<p>The <i>Certificate</i> of Insurance below applies to the TD Aeroplan Visa Infinite Privilege Card which will be referred to as a “TD Credit Card” or “Card” throughout the <i>Certificate</i>: This <i>Certificate</i> contains a clause which may limit the amount payable. <i>Certificate</i> of Insurance The terms of the Delayed and Lost Baggage Group Policy #TDVB112008 (the Master Policy) issued by TD Home and Auto Insurance Company (Insurer) to The Toronto-Dominion Bank are described in this <i>Certificate</i>. <i>Our Administrator</i> administers the insurance on behalf of TD Home and Auto Insurance Company, and provides claims assistance, claims payment and administrative services under the Group Policy. Words in italics in this <i>Certificate</i> are defined in section 1.</p>	<p>Section 1 – Introduction Certificate of Insurance</p> <p>Claims administration and adjudication services are provided by Global Excel Management Inc. The <i>Certificate</i> applies to the TD Aeroplan Visa Infinite Privilege Card, which will be referred to as a “TD Credit Card” or “Card” throughout the <i>Certificate</i>. TD Home and Auto Insurance Company (“TDH&A”) provides the insurance for this <i>Certificate</i> under Master Policy #TDVB112008 (the “Policy”) issued to The Toronto-Dominion Bank. This <i>Certificate</i> contains a clause which may limit the amount payable.</p>

<p>Delayed and Lost Baggage Insurance</p>	<p>Section 1 – Definitions <i>ACCOUNT(S)</i> means <i>Your</i> TD Credit Card <i>Account</i> accessed <i>Using</i> <i>Your</i> TD Credit Card or TD Visa Cheque. <i>ACCOUNT HOLDER</i> means the <i>Primary Cardholder</i> to whom the monthly <i>Account</i> statement is issued and who is a resident of Canada, and any <i>Additional Cardholder</i> who is a resident of Canada. The <i>Account Holder</i> may be referred herein as “<i>You</i>” or “<i>Your</i>”. <i>ADDITIONAL CARDHOLDER</i> means a person to whom a TD Credit Card has been issued at the authorization of the <i>Primary Cardholder</i>. <i>ADMINISTRATOR</i> means the service provider arranged by the Insurer to provide claims payment and administrative services under the Policy. <i>BAGGAGE DELAY</i> means a Covered Person’s <i>Checked Baggage</i> is delayed by more than <i>four (4) hours</i> from the Covered Person’s time of arrival at the <i>Final Destination</i>. <i>CHECKED BAGGAGE</i> means suitcases or other containers specifically designated for carrying personal belongings, for which a baggage claim check has been issued to the <i>Covered Person</i> by a <i>Common Carrier</i>. <i>COMMON CARRIER</i> means any land, air, or water conveyance which is licensed to carry passengers for compensation and which undertakes to carry all persons indifferently who may apply for passage, so long as there is room, and there is no legal excuse for refusal. <i>COVERED PERSON</i> means the <i>Account Holder</i>, <i>Spouse</i> or <i>Dependent Children</i> whose name is on the <i>Ticket</i>, or, if no name is on the <i>Ticket</i>, for whom a <i>Ticket</i> has been purchased. <i>DEPENDENT CHILDREN</i> means any natural child (legitimate or illegitimate), any legally adopted child, any step-child or any child dependent upon the <i>Account Holder</i> in a “parent-child” relationship for maintenance and support who is: 50 (i.) under the age of twenty-one (21) years and unmarried, or (ii.) under the age of twenty-five (25) years, unmarried and in full time attendance at an institution of higher learning, or (iii.) by reason of mental or physical infirmity, incapable of self-sustaining employment and totally dependent upon the <i>Account Holder</i> for support within the terms of the Income Tax Act. <i>ESSENTIAL ITEMS</i> means essential clothing and toiletries that the <i>Covered Person</i> was carrying in the baggage, which the <i>Covered Person</i> must replace during the period of <i>Baggage Delay</i>. <i>FINAL DESTINATION</i> means the away-from-home <i>Ticketed</i> destination for any particular day of travel, as shown on <i>Your Ticket</i>. <i>PRIMARY CARDHOLDER</i> means a person who applied for a TD Credit Card, whose name is on the <i>Account</i> and to whom a TD Credit Card has been issued. <i>SPOUSE</i> means the person who is (i) lawfully married to the <i>Account Holder</i> or (ii) the person who has been living with the <i>Account Holder</i> for a continuous period of at least one year and who is publicly represented as the <i>Account Holder’s Spouse</i>. <i>TICKET</i> means evidence of the fare paid for</p>	<p>Section 4 – Definitions</p> <p>In this <i>Certificate</i>, the following words and phrases shown in italics and capitalized have the meanings shown below. As <i>You</i> read through the <i>Certificate</i>, <i>You</i> may need to refer to this Section to ensure <i>You</i> have a full understanding of <i>Your</i> coverage, limitations and exclusions.</p> <p>Account means the <i>Primary Cardholder’s</i> TD Credit Card Account that the <i>Bank</i> maintains.</p> <p>Account Holder means the <i>Primary Cardholder</i> to whom the monthly <i>Account</i> statement is issued and who is a resident of Canada, and any <i>Additional Cardholder</i> who is a resident of Canada. The <i>Account Holder</i> may be referred herein as “<i>You</i>” or “<i>Your</i>”.</p> <p>Additional Cardholder means a person to whom a TD Credit Card has been issued at the authorization of the <i>Primary Cardholder</i>.</p> <p>Aeroplane Points mean the points awarded through the Aeroplane program which can be redeemed for rewards. <i>Aeroplane Points</i> have no monetary value.</p> <p>Baggage Delay means a <i>Covered Person’s Checked Baggage</i> is delayed by more than 4 hours from the <i>Covered Person’s</i> time of arrival at the <i>Final Destination</i>.</p> <p>Bank means The Toronto-Dominion Bank.</p> <p>Certificate means this Certificate of Insurance.</p> <p>Checked Baggage means suitcases or other containers specifically designated for carrying personal belongings, for which a baggage claim check has been issued to the <i>Covered Person</i> by a <i>Common Carrier</i>.</p> <p>Common Carrier means any land, air, or water conveyance, which is licensed to carry passengers for compensation and which undertakes to carry all persons indifferently who may apply for passage, so long as there is room, and there is no legal excuse for refusal.</p> <p>Covered Person means the <i>Account Holder</i>, <i>Account Holder’s Spouse</i> or <i>Dependent Children</i> whose name is on the <i>Ticket</i>, or, if no name is on the <i>Ticket</i>, for whom a <i>Ticket</i> has been purchased.</p> <p>Dependent Child(ren) mean(s) <i>Your</i> natural, adopted, or stepchildren who are:</p> <ul style="list-style-type: none"> • unmarried; and • dependent on <i>You</i> for financial maintenance and support; and <ul style="list-style-type: none"> • under 21 years of age; or • under 25 years of age and attending an institution of higher learning, full time, in Canada; or • permanently, mentally and physically challenged and incapable of self-support. <p>Essential Items mean essential clothing and toiletries that the <i>Covered Person</i> was carrying in the baggage, which the <i>Covered Person</i> must replace during the period of <i>Baggage Delay</i>.</p> <p>Final Destination means the away-from-home ticketed destination for any particular day of travel, as shown on <i>Your Ticket</i>.</p> <p>Good Standing: An <i>Account</i> is in <i>Good Standing</i> if:</p> <ul style="list-style-type: none"> • the <i>Primary Cardholder</i> has applied for the <i>Account</i>; • the <i>Bank</i> has approved and opened the <i>Account</i>; • the <i>Primary Cardholder</i> has not advised the <i>Bank</i> to close the <i>Account</i>; and • the <i>Bank</i> has not suspended or revoked credit privileges or otherwise closed the <i>Account</i>. <p>Primary Cardholder means a person who applied for a TD Credit Card, whose name is on the <i>Account</i> and to whom a TD Credit Card has</p>
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Changes to your Certificate of Insurance, as of March 24, 2022

Benefit	Before	After
	<p>travel on a <i>Common Carrier</i> and at least 75% of the cost paid,</p>	<p>been issued. A <i>Primary Cardholder</i> does not include an <i>Additional Cardholder</i>. Spouse means: <ul style="list-style-type: none"> • the person who the <i>Account Holder</i> is legally married to; or • the person the <i>Account Holder</i> has lived with for at least 1 continuous year in the same household and publicly refers to as their partner. Ticket means evidence of the fare paid for travel on a <i>Common Carrier</i> and at least 75% of the cost paid (1) by charge to <i>Your Account</i>, (2) by redemption of <i>Aeroplan Points</i>, or (3) by a combination of (1) and (2). Our means TD Life Insurance Company.</p>
<p>Delayed and Lost Baggage Insurance</p>	<p>Section 2 – Who is covered The <i>Account Holder</i>, the <i>Account Holder’s Spouse</i>, and the <i>Account Holder’s Dependent Children</i> whose name is on a <i>Ticket</i>, or if no name is on a <i>Ticket</i>, for whom the <i>Ticket</i> has been purchased.</p>	<p>Section 3 – Eligibility <i>Covered Person</i> as defined provided that: <ul style="list-style-type: none"> • <i>Your Account</i> privileges have not been terminated or suspended; and • <i>Your Account</i> is not more than ninety (90) days past due; and • <i>Your TD Credit Card</i> must be in <i>Good Standing</i>. </p>
<p>Delayed and Lost Baggage Insurance</p>	<p>Section 3 – What are the Coverages A. Delayed Baggage In the event of <i>Baggage Delay</i>, <i>You</i> will be reimbursed for the cost to replace <i>Essential Items</i> provided those purchases are made before the baggage is returned to the <i>Covered Person</i> but in no event more than ninety-six (96) <i>hours</i> after arriving at the <i>Final Destination</i>. The total benefit payable in respect of sub-section A is subject to a maximum of \$1,000 per <i>Covered Person</i> per Trip. B. Lost Baggage In the event the <i>Common Carrier</i> never locates the <i>Covered Person’s Checked Baggage</i>, <i>You</i> will be reimbursed for the portion of the replacement cost of lost personal property that is not paid by the <i>Common Carrier</i> or other insurance. The total benefit payable in respect of sub-section B is subject to a maximum of \$2,500 per <i>Covered Person</i> per Trip. To activate coverage, use <i>Your Card</i> to pay at least 75% of the <i>Ticket</i> cost. Coverage will be in force while baggage is in the <i>custody</i> of the <i>Common Carrier</i>.</p>	<p>Section 5 – Description of Insurance Coverage A. Delayed Baggage In the event of <i>Baggage Delay</i>, the <i>Account Holder</i> will be reimbursed for the cost to replace <i>Essential Items</i> provided those purchases are made before the baggage is returned to the <i>Covered Person</i> but in no event more than ninety-six (96) <i>hours</i> after arriving at the <i>Final Destination</i>. The total benefit payable in respect of sub-section A is subject to a maximum of \$1,000 per <i>Covered Person</i> per Trip. B. Lost Baggage In the event the <i>Common Carrier</i> never locates the <i>Covered Person’s Checked Baggage</i>, the <i>Covered Person</i> will be reimbursed for the portion of the replacement cost of lost personal property that is not paid by the <i>Common Carrier</i> or other insurance. The total benefits payable in respect of sub-section B is subject to a maximum of \$2,500 per <i>Covered Person</i> per Trip. To activate coverage, Use <i>Your TD Credit Card</i> to pay at least 75% of the <i>Ticket</i> cost. Coverage will be in force while baggage is in the <i>custody</i> of the <i>Common Carrier</i>.</p>
<p>Delayed and Lost Baggage Insurance</p>	<p>Section 4 – Termination of Coverage Coverage terminates on the earliest of the following: 1) When <i>Your Account</i> is closed; 2) When <i>Your Account</i> is ninety (90) or more days past due, but coverage is automatically reinstated when the <i>Account</i> is returned to <i>Good Standing</i>; 3) When the <i>Policy</i> is cancelled except that the <i>Insurer</i> will remain liable for the claim if the event giving rise to the claim occurred prior to the effective termination date and the claim is otherwise valid.</p>	<p>Section 7 – Termination of Coverage No change.</p>

Changes to your Certificate of Insurance, as of March 24, 2022

Benefit	Before	After
Delayed and Lost Baggage Insurance	<p>Section 5 – Exclusion and Limitations No coverage is provided for: Losses occurring when the <i>Checked Baggage</i> is delayed on a Covered Person’s return home to their province or residence; expenses incurred more than ninety-six (96) hours after arriving at the <i>Final Destination</i> shown on the <i>Ticket</i>; expenses incurred after the <i>Checked Baggage</i> is returned to the Covered Person; losses caused by or resulting from any criminal act by the Covered Person; baggage not checked; baggage held, seized, quarantined or destroyed by <i>customs</i> or government agency; money; securities; credit cards and other negotiable instruments; <i>Tickets</i> and documents.</p>	<p>Section 6 – Limitations and Exclusions</p> <p>No change.</p>

Changes to your Certificate of Insurance, as of March 24, 2022

Benefit	Before	After
<p>Delayed and Lost Baggage Insurance</p>	<p>Section 6 – Claims The <i>Account Holder</i> must furnish the Insurer with proof of claim. This shall include a signed loss report. (A) Initial Notification If <i>You</i> have incurred a claim covered under the Delayed/Lost Baggage Plan, <i>You</i> must give notice by contacting the <i>Administrator</i> within forty-five (45) days from the date of the occurrence of the delay. Call toll-free between 8:00 a.m. and 8:00 p.m. Eastern Time, Monday to Saturday: 1-866-374-1129 or (416) 977-4425. The <i>Covered Person</i> will be asked to provide or, if writing, should provide: • name, address, and telephone number; • <i>Account</i> number; • the date, time and place of the occurrence of the delay or loss; and • the amount of the claim. (B) Written Proof In the event of a claim covered under the Delayed/Lost Baggage Plan, a loss report will be mailed by the <i>Administrator</i> to the <i>Covered Person</i>. <i>You</i> should complete it in full and return it within ninety (90) days from the date of occurrence of the delay or loss. The loss report shall include but may not be limited to: • a copy of the <i>Ticket</i>; • a copy of the baggage claim <i>Ticket</i>; • a copy of the <i>Account</i> charge receipt or TD Credit Card statement for the cost of the <i>Ticket</i> and/or proof of redemption; • a copy of a statement from <i>Your</i> homeowner’s or tenant’s insurance carrier indicating the extent to which <i>You</i> have been reimbursed for any items permanently lost with <i>Your</i> baggage; • itemized receipts for actual expenses incurred for essential clothing and toiletries; • written statement from the <i>Common Carrier</i> confirming all of the following specifics: • date and time of delay or loss; • date and time that baggage was returned, or if not returned, a statement of the amount of liability accepted by the <i>Common Carrier</i>, if any; • reason or circumstances surrounding the delay or loss; and • any other information reasonably required by the Insurer.</p>	<p>Section 8 – How to Submit a Claim The <i>Account Holder</i> must furnish the Insurer with proof of claim. This shall include a signed <i>Loss</i> report. Who to Contact to Submit a Claim a) Initial Notification – If <i>You</i> have incurred a claim covered under the Delayed/Lost Baggage Plan, <i>You</i> must give notice by contacting <i>Our Administrator</i> within 45 days from the date of the occurrence of the delay. Call 1-866-374-1129 (toll-free) from Canada or the U.S., or +1-416-977-4425 (collect) from other countries between 8:00 a.m. and 8:00 p.m. ET, Monday to Friday. The <i>Covered Person</i> will be asked to provide or, if writing, should provide: • the name, address, and telephone number; • the account number; • the date, time and place of the occurrence of the delay or <i>Loss</i>; and • the amount of the claim. b) Written Proof – Complete the Required Form • Request the Form: To request a claim form, call <i>Our Administrator</i> at 1-866-374-1129 (toll-free) from Canada or the U.S., or +1-416-977-4425 (collect) from other countries from 8 a.m. to 8 p.m. ET, Monday to Friday. • Time limit from date of event: If <i>You</i> are making a claim, <i>You</i> must send <i>Our Administrator</i> the appropriate claim forms, together with written proof of <i>Loss</i> (e.g., original invoices and <i>Tickets</i>) as soon as possible. In every case, <i>You</i> must submit <i>Your</i> completed claim form with required documentation within 90 days from the date of occurrence of the delay or <i>Loss</i>. Failure to provide the applicable documentation may invalidate <i>Your</i> claim. Provide the information requested The <i>Loss</i> report shall include but may not be limited to: • a copy of the <i>Ticket</i>; • a copy of the baggage claim <i>Ticket</i>; • a copy of the <i>Account</i> charge receipt or TD Credit Card statement for the cost of the <i>Ticket</i> and/or proof of redemption; • a copy of a statement from <i>Your</i> homeowner’s or tenant’s insurance carrier indicating the extent to which <i>You</i> have been reimbursed for any items permanently lost with <i>Your</i> baggage; • itemized receipts for actual expenses incurred for essential clothing and toiletries; • a written statement from the <i>Common Carrier</i> confirming all of the following specifics: • date and time of delay or <i>Loss</i>; • date and time that baggage was returned, or if not returned, a statement of the amount of liability accepted by the <i>Common Carrier</i>, if any; • reason or circumstances surrounding the delay or <i>Loss</i>; and • any other information reasonably required by the Insurer. What Claimant Can Expect from Insurer Once <i>We</i> have approved the claim, <i>We</i> will notify <i>You</i> and payment will be made within 60 days after receipt of the required claim forms, documentation and written proof of <i>Loss</i>. If the claim has been denied, <i>We</i> will inform <i>You</i> of the claim denial reasons within 60 days after receipt of the required claim forms and written proof of <i>Loss</i>.</p>

Changes to your Certificate of Insurance, as of March 24, 2022

Benefit	Before	After
Delayed and Lost Baggage Insurance	<p>Section 7 – General Conditions Legal Action Limitation Period No legal action may be brought to recover on the Policy until sixty (60) days after the Insurer has been given written proof of loss. Every action or proceeding against the insurer for the recovery of insurance money payable under the contract is absolutely barred unless commenced within the time set out in the Insurance Act (for actions or proceedings governed by the laws of Alberta or British Columbia), The Insurance Act (for actions or proceedings governed by the laws of Manitoba), the Limitations Act, 2002 (for actions or proceedings governed by the laws of Ontario), the Civil Code of Quebec (for actions or proceedings governed by the laws of Quebec), or other applicable legislation. Other Insurance All of <i>Our</i> policies are excess insurance, meaning that any other sources of recovery <i>You</i> have will pay first, and this insurance policy will be the last to pay. The total benefits payable under all <i>Your</i> insurance, including this <i>Certificate</i>, cannot be more than the actual expenses for a claim. If an <i>Insured Person</i> is also insured under any other insurance <i>Certificate</i> or policy, <i>We</i> will coordinate payment of benefits with the other insurer. Subrogation with Respect to Lost Baggage As a condition to the payment of any claim to an <i>Account Holder</i> under the Policy, the <i>Account Holder</i> and/or any <i>Covered Person</i> shall, upon request, transfer or assign to the Insurer all legal rights against all other parties for the loss. The <i>Account Holder</i> shall give the Insurer all such assistance as the Insurer may reasonably require to secure its rights and remedies, including the execution of all documents necessary to enable the Insurer to bring suit in the name of the <i>Account Holder</i> and/or Covered Person. Benefits <i>Account Holder</i> Only This protection shall inure ONLY to the benefit of the <i>Account Holder</i>. No other person or entity shall have any right, remedy or claim, either legal or equitable to the benefits. False Claim If an <i>Account Holder</i> makes any claim knowing it to be false or fraudulent in any respect, such <i>Account Holder</i> shall no longer be entitled to the benefits of this protection nor to the payment of any claim made under the Policy. Policy This <i>Certificate</i> is not a policy of insurance. In the event of any conflict between this description of coverage and the Policy, the terms and conditions of the Policy will govern. In no event does possession of multiple <i>Certificates</i> or TD Credit Cards entitle a <i>Covered Person</i> to benefits in excess of this stated herein for any one loss sustained.</p>	<p>Section 9 – General Conditions Conformance with Statutes Any terms of this Policy which are in conflict with the applicable statutes, laws or regulations of the province or territory in which this Policy is issued are amended to conform to such statutes.</p> <p>False Claim If an <i>Account Holder</i> makes any claim knowing it to be false or fraudulent in any respect, such <i>Account Holder</i> shall no longer be entitled to the benefits of this protection nor to the payment of any claim made under the Policy.</p> <p>Legal Action Limitation Period Every action or proceeding against the Insurer for the recovery of insurance money payable under the contract is absolutely barred unless commenced within the time set out in the <i>Insurance Act</i> (for actions or proceedings governed by the laws of Alberta or British Columbia), <i>The Insurance Act</i> (for actions or proceedings governed by the laws of Manitoba), the <i>Limitations Act, 2002</i> (for actions or proceedings governed by the laws of Ontario), or other applicable legislation. For actions or proceedings governed by the laws of Quebec, the prescriptive period is set out in the <i>Civil Code of Quebec</i>.</p> <p>Master Group Policy This <i>Certificate</i> is a description of coverage provided by Policy #TDVB112008 issued to The Toronto-Dominion Bank. All terms and conditions of the Policy govern. In no event does possession of multiple certificates or TD Credit Cards entitle a <i>Covered Person</i> to benefits in excess of those described herein for any <i>Loss</i> sustained.</p> <p>Other insurance All of <i>Our</i> policies are excess insurance, meaning that any other sources of recovery <i>You</i> have will pay first, and this insurance policy will be the last to pay. The total benefits payable under all <i>Your</i> insurance, including this <i>Certificate</i>, cannot be more than the actual expenses for a claim. If a <i>Covered Person</i> is also insured under any other insurance certificate or policy, <i>We</i> will coordinate payment of benefits with the other insurer.</p> <p>Subrogation with Respect to Lost Baggage As a condition to the payment of any claim to an <i>Account Holder</i> under the <i>Certificate</i>, the <i>Account Holder</i> and/or any <i>Covered Person</i> shall, upon request, transfer or assign to the Insurer all legal rights against all other parties for the <i>Loss</i>. The <i>Account Holder</i> shall give the Insurer all such assistance as the Insurer may reasonably require to secure its rights and remedies, including the execution of all documents necessary to enable the Insurer to bring suit in the name of the <i>Account Holder</i> and/or <i>Covered Person</i>.</p>
Emergency Travel Assistance Services	<p>Emergency Travel Assistance Services under this <i>Certificate</i> is provided by: Allianz Global Assistance (<i>Administrator</i>) P.O. Box 277, Waterloo, ON N2J 4A4 Phone: 1-866-374-1129 or (416) 977-4425</p>	<p>Emergency Travel Assistance Services is provided by: Global Excel Management Inc. (“Administrator”) 73 Queen Street, Sherbrooke, QC J1M 0C9 Phone: 1-800-871-8334 or +1-416-977-8297</p>

Changes to your Certificate of Insurance, as of March 24, 2022

Benefit	Before	After
Emergency Travel Assistance Services	<p>Provided by <i>Our Administrator</i> under a service agreement with TD Life Insurance Company. This is not an insurance benefit but assistance services only. The Coverage <i>Certificate</i> below applies to the TD Aeroplan Visa Infinite Privilege Card which will be referred to as a "TD Credit Card" throughout the <i>Certificate</i>:</p> <p>Important Note The following describes assistance services only, not insurance benefits. Any payments made by our Administrator will be charged to your TD Credit Card, subject to credit availability, unless you make other arrangements to reimburse our Administrator.</p>	<p>Provided by <i>Our Administrator</i> under a service agreement with TD Life Insurance Company ("TD Life"). This is not an insurance benefit but assistance services only. This is a service provided by <i>Our Administrator</i>. The Emergency Travel Assistance Services below applies to the TD Aeroplan Visa Platinum Card, which will be referred to as a "TD Credit Card" throughout.</p>
Emergency Travel Assistance Services	<p>Multilingual Assistance Coordinators are on call 24 hours a day. <i>Our Administrator</i> Assistance Coordinators are supported by a network of medical professionals including <i>Physicians</i> experienced in emergency medical assistance. For Emergency Assistance 24 Hours A Day: In Canada and U.S.A., Call 1-866-374-1129 In Other Countries, Call Collect (416) 977-4425</p>	<p>Description of Emergency Travel Assistance Services Multilingual Assistance Coordinators are on call 24 hours a day. <i>Our Administrator's</i> Assistance Coordinators are supported by a network of medical professionals, including physicians experienced in emergency medical assistance. For Emergency Assistance 24 hours a day, call <i>Our Administrator</i> at 1-800-871-8334 (toll-free) from Canada or the U.S., or +1-416-977-8297 (collect) from other countries.</p>
Emergency Travel Assistance Services	<p>1 – Medical Assistance Services Medical Referrals If a <i>Medical Emergency</i> arises while travelling, <i>You</i> can contact <i>Our Administrator</i> Emergency Assistance Centre and <i>You</i> will be referred to the nearest designated <i>Physician</i> or medical facility. Medical Consultation and Monitoring <i>Our Administrator's</i> network of medical professionals is available 24 hours a day, 365 days a year, to consult with <i>Your</i> attending <i>Physician</i> to ensure that <i>Your</i> medical needs are being met. <i>Our Administrator's</i> network of medical professionals is experienced in working with <i>Physicians</i> outside of Canada to determine the adequacy of care being received and the need for further assistance. Medical Transportation When <i>Our Administrator</i>, in consultation with its network of medical professionals and in conjunction with <i>Your</i> attending <i>Physician</i>, determine that transfer to another medical facility is necessary, <i>Our Administrator</i> will coordinate all aspects of the transport to and from the <i>Hospital</i> and airport, at the point of departure and arrival. <i>Our Administrator</i> Assistance Coordinators will arrange for qualified medical accompaniment, if necessary. Neither The Toronto-Dominion <i>Bank</i>, TD Life Insurance Company or any other insurer, nor <i>Our Administrator</i> is responsible for the availability, quality or results of any medical <i>Treatment</i> <i>You</i> receive or fail to receive for any reason</p>	<p>Section 2 – Medical Assistance Services</p> <p>No change.</p>
Emergency Travel Assistance Services	<p>2 – Payment Assistance <i>Our Administrator</i> can assist <i>You</i> in arranging or coordinating payment (over \$200) to emergency medical or <i>Hospital</i> service providers. Full liability for payment of these services will, however, rest with <i>You</i>.</p>	<p>Section 3 – Payment Assistance <i>Our Administrator</i> can assist <i>You</i> in arranging or coordinating payment to emergency medical or hospital service providers. Full liability for payment of these services will rest with <i>You</i>.</p>

Changes to your Certificate of Insurance, as of March 24, 2022

Benefit	Before	After
Emergency Travel Assistance Services	<p>3 – Travel Assistance Services</p> <p>Legal Assistance <i>Our Administrator</i> can assist <i>You</i> to post bail and pay legal fees, if necessary.</p> <p>Emergency Cash Transfer In the event of theft, loss or emergency, <i>Our Administrator</i> can assist <i>You</i> to obtain cash which will be charged to <i>Your</i> TD Credit Card.</p> <p>Lost Document and <i>Ticket</i> Replacement In the event of theft or loss, <i>Our Administrator</i> can assist <i>You</i> to replace the necessary travel documents or <i>Tickets</i>.</p> <p>Lost Luggage Assistance In the event of theft or loss, <i>Our Administrator</i> can assist <i>You</i> to locate or replace luggage and personal effects.</p> <p>TD Aeroplan Visa Infinite Privilege Cardholders are also eligible for Delayed and Lost Baggage Insurance; however, this coverage is entirely separate (see <i>Your Coverage Certificate</i> in this Document for details).</p> <p>Translation Services <i>Our Administrator</i> can provide immediate translation services in an emergency situation. <i>Our Administrator</i> will make a good faith effort to provide these services, however, it has no liability to <i>You</i> if local laws, insurrection, epidemic, unavailability of health care providers, strikes, severe <i>Weather</i>, geographic inaccessibility or other factors beyond their control delay, interfere or prevent the provision of these services.</p>	<p>Section 4 – Travel Assistance Services <i>You</i> are fully liable for repaying the following services that are charged to <i>Your</i> TD Credit Card.</p> <p>Legal Assistance <i>Our Administrator</i> can assist <i>You</i> to post bail and pay legal fees, if necessary.</p> <p>Emergency Cash Transfer In the event of theft, loss or emergency, <i>Our Administrator</i> can assist <i>You</i> to obtain cash which will be charged to <i>Your</i> TD Credit Card.</p> <p>Lost Document and Ticket Replacement In the event of theft or loss, <i>Our Administrator</i> can assist <i>You</i> to replace the necessary travel documents or tickets.</p> <p>Lost Luggage Assistance In the event of theft or loss, <i>Our Administrator</i> can assist <i>You</i> to locate or replace luggage and personal effects. <i>Account Holders</i> are also eligible for Delayed and Lost Baggage Insurance; however, this coverage is entirely separate (see <i>Your</i> Delayed and Lost Baggage certificate of insurance).</p> <p>Translation Services <i>Our Administrator</i> can provide immediate translation services in an emergency situation. <i>Our Administrator</i> will make a good faith effort to provide these services, however, it has no liability to <i>You</i> if local laws, insurrection, epidemic, unavailability of health care providers, strikes, severe weather, geographic inaccessibility or other factors beyond their control delay, interfere or prevent the provision of these services.</p>
Auto Rental Collision/Loss Damage Insurance	Coverage under this <i>Certificate</i> is provided by: TD Home and Auto Insurance Company (Insurer) 320 Front Street West, 3rd Floor, Toronto, ON M5V 3B6	Coverage under this Certificate is provided by: TD Home and Auto Insurance Company (“Insurer”) P.O. Box 1, TD Centre, Toronto, ON M5K 1A2
Auto Rental Collision/Loss Damage Insurance	Administration services are provided by: Allianz Global Assistance (<i>Administrator</i>) P.O. Box 277, Waterloo, ON N2J 4A4 Phone: 1-866-374-1129 or (416) 977-4425	Claims administration and adjudication services are provided by: Global Excel Management Inc. (“Administrator”) 73 Queen Street, Sherbrooke, QC J1M 0C9 Phone: 1-866-374-1129 or +1-416-977-4425

Changes to your Certificate of Insurance, as of March 24, 2022

Benefit	Before	After
<p>Auto Rental Collision/Loss Damage Insurance</p>	<p>The <i>Certificate</i> of Insurance below applies to the TD Aeroplan Visa Infinite Privilege Card which will be referred to as a “TD Credit Card” throughout the <i>Certificate</i>. This <i>Certificate</i> contains a clause which may limit the amount payable. Please note that in Alberta and British Columbia, Statutory Conditions are deemed to be part of every contract that include insurance against loss or damage to property and said Statutory Conditions are included in the Policy. <i>Certificate</i> of Insurance Please read this <i>Certificate</i> carefully. It outlines what Collision/Loss Damage Insurance is and what is covered along with the conditions under which a payment will be made when <i>You</i> rent and operate a rental vehicle but do not accept the Collision Damage Waiver (CDW) or its equivalent offered by the Rental Agency. It also provides instructions on how to make a claim. This <i>Certificate</i> should be kept in a safe place and carried with <i>You</i> when <i>You</i> travel. TD Home and Auto Insurance Company (referred to in this <i>Certificate</i> as the “Company”) provides the insurance for this <i>Certificate</i> under Policy TDV092010 (referred to in this <i>Certificate</i> as the “Policy”). <i>Our Administrator</i> administers the insurance on behalf of TD Home and Auto Insurance Company, and provides claims assistance, claims payment and administrative services under the Group Policy. This <i>Certificate</i> is not a contract of insurance. It contains only a summary of the principal provisions of the Policy. All benefits are subject in every respect to the Policy which alone constitutes the Agreement under which payments are made. This coverage may be cancelled, changed or modified at the option of the card issuer or the Company with at least 30 days written notice to the Primary Cardholder.</p>	<p>Section 1 – Introduction Certificate of Insurance The <i>Certificate</i> below applies to the TD Aeroplan Visa Infinite Privilege Card, which will be referred to as a “TD Credit Card” throughout the <i>Certificate</i>. Please read this <i>Certificate</i> carefully. It outlines what Collision/Loss Damage Insurance is and what is covered along with the conditions under which a payment will be made when <i>You</i> rent and operate a rental vehicle but do not accept the Collision Damage Waiver (“CDW”) or its equivalent offered by the <i>Rental Agency</i>. It also provides instructions on how to make a claim. This <i>Certificate</i> should be kept in a safe place and carried with <i>You</i> when <i>You</i> travel. TD Home and Auto Insurance Company (referred to in this <i>Certificate</i> as the “Insurer”), provides the insurance for this <i>Certificate</i> under Policy #TDV092010 (referred to in this <i>Certificate</i> as the “Policy”). <i>Our Administrator</i> administers the insurance on behalf of TD Home and Auto Insurance Company, and provides claims assistance, claims payment and administrative services under the Group Policy. This <i>Certificate</i> is not a contract of insurance. It contains only a summary of the principal provisions of the Policy. All benefits are subject in every respect to the Policy which alone constitutes the Agreement under which payments are made. This <i>Certificate</i> contains a clause which may limit the amount payable. This coverage may be cancelled, changed or modified at the option of the card issuer or the Insurer Company with at least 30 days written notice to the <i>Primary Cardholder</i>. How to contact Us <i>You</i> may contact our <i>Administrator</i> by calling: 1-866-374-1129 (toll-free) from Canada or the U.S., or +1-416-977-4425 (collect) from other countries.</p>

<p>Auto Rental Collision/Loss Damage Insurance</p>	<p>To help <i>You</i> understand this document, some key words have been defined below: <i>ACCOUNT</i> means <i>Your</i> TD Credit Card <i>Account</i> accessed Using <i>Your</i> TD Credit Card or TD Visa Cheque <i>ACCOUNT HOLDER</i> means the <i>Primary Cardholder</i> to whom the monthly <i>Account</i> statement is issued and who is a resident of Canada, and any <i>Additional Cardholder</i> who is a resident of Canada. The <i>Account Holder</i> may be referred herein as “<i>You</i>” or “<i>Your</i>”. <i>ADDITIONAL CARDHOLDER</i> means a person to whom a TD Credit Card has been issued at the authorization of the <i>Primary Cardholder</i>. <i>ADMINISTRATOR</i> means the service provider arranged by the Company to provide claims payment and administrative services under the Policy. <i>CAR SHARING</i> means a car rental club which gives its members 24 hour access to a fleet of cars parked in a convenient location. <i>CARDHOLDER</i> means the <i>Primary Cardholder</i> and any <i>Additional Cardholder</i> in accordance with the <i>Cardholder Agreement</i>. <i>INSURED PERSON</i> means (1) <i>You</i> the <i>Cardholder</i>, who presents himself (herself) in person at the <i>Rental Agency</i>, signs the rental contract, declines the <i>Rental Agency’s CDW</i> or its equivalent and takes possession of the rental vehicle and who complies with the terms of this Policy. (2) Any other person who drives the same rental vehicle with <i>Your</i> permission whether or not such person has been listed on the rental vehicle contract or has been identified to the <i>Rental Agency</i> at the time of making the rental, however, <i>You</i> and all drivers must otherwise qualify under and follow the terms of the rental contract and must be legally licensed and permitted to drive the rental vehicle under the laws of the jurisdiction in which the rental vehicle shall be <i>Used</i>. Important: Check with <i>Your</i> personal automobile insurer and the <i>Rental Agency</i> to ensure that <i>You</i> and all other drivers have adequate third party liability, personal injury and damage to property coverage. This policy only covers loss or damage to the rental vehicle as stipulated herein. <i>LOSS OF USE</i> means the amount paid to a <i>Rental Agency</i> to compensate it when a rental vehicle is unavailable for rental while undergoing repairs for damage incurred during the rental period. <i>PRIMARY CARDHOLDER</i> means a person who has applied for a TD Credit Card, whose name is on the <i>Account</i> and to whom a TD Credit Card has been issued. <i>RENTAL AGENCY</i> means an auto <i>Rental Agency</i> licensed to rent vehicles and which provides a rental agreement. For greater certainty, throughout this <i>Certificate</i> of insurance the terms ‘rental company’ and ‘rental agency’ refer to both traditional auto rental agencies and <i>Car Sharing Programs</i>. <i>RENTAL AGENCY’S CDW</i> means an optional Collision Damage Waiver (CDW) or similar coverage offered by car rental companies that relieves renters of financial responsibility if the car is damaged or stolen while under rental contract. <i>Rental Agency’s</i></p>	<p>Section 3 – Definitions</p> <p>In this <i>Certificate</i>, the following words and phrases shown in italics and capitalized have the meanings shown below. As <i>You</i> read through the <i>Certificate</i>, <i>You</i> may need to refer to this Section to ensure <i>You</i> have a full understanding of <i>Your</i> coverage, limitations and exclusions.</p> <p>Account means the <i>Primary Cardholder’s</i> TD Credit Card <i>Account</i> that the <i>Bank</i> maintains.</p> <p>Account Holder means the <i>Primary Cardholder</i> to whom the monthly <i>Account</i> statement is issued and who is a resident of Canada, and any <i>Additional Cardholder</i> who is a resident of Canada. The <i>Account Holder</i> may be referred herein as “<i>You</i>” or “<i>Your</i>”.</p> <p>Additional Cardholder means a person to whom a TD Credit Card has been issued at the authorization of the <i>Primary Cardholder</i>.</p> <p>Aeroplane Points mean the points awarded through the <i>Aeroplane</i> program which can be redeemed for rewards. <i>Aeroplane Points</i> have no monetary value.</p> <p>Bank means The Toronto-Dominion Bank.</p> <p>Car Sharing means a car rental club, which gives its members 24-hour access to a fleet of cars parked in a convenient location.</p> <p>Certificate means this <i>Certificate of Insurance</i>.</p> <p>Good Standing means:</p> <ul style="list-style-type: none"> • the <i>Primary Cardholder</i> has applied for the <i>Account</i>; • the <i>Bank</i> has approved and opened the <i>Account</i>; • the <i>Primary Cardholder</i> has not advised the <i>Bank</i> to close the <i>Account</i>; and • the <i>Bank</i> has not suspended or revoked credit privileges or otherwise closed the <i>Account</i>. <p>Insured Person means:</p> <ol style="list-style-type: none"> 1. <i>You</i> the <i>Account Holder</i> who presents themselves in person at the <i>Rental Agency</i>, signs the rental contract, declines the <i>Rental Agency’s Collision Damage Waiver (CDW)</i> or its equivalent and takes possession of the rental vehicle and who complies with the terms of this Policy. 2. Any other person who drives the same rental vehicle with <i>Your</i> permission whether or not such person has been listed on the rental vehicle contract or has been identified to the <i>Rental Agency</i> at the time of making the rental; however, <i>You</i> and all drivers must otherwise qualify under and follow the terms of the rental contract and must be legally licensed and permitted to drive the rental vehicle under the laws of the jurisdiction in which the rental vehicle shall be used. <p>Important: Check with <i>Your</i> personal automobile insurer and the <i>Rental Agency</i> to ensure that <i>You</i> and all other drivers have adequate third-party liability, personal injury and damage to property coverage. This policy only covers loss or damage to the rental vehicle as stipulated herein.</p> <p>Loss of Use means the amount paid to a <i>Rental Agency</i> to compensate it when a rental vehicle is unavailable for rental while undergoing repairs for damage incurred during the rental period.</p> <p>Primary Cardholder means a person who has applied for a TD Credit Card, whose name is on the <i>Account</i> and to whom a TD Credit Card has been issued.</p> <p>Rental Agency means an auto <i>Rental Agency</i> licensed to rent vehicles and which provides a rental agreement. Throughout this <i>Certificate</i> the terms “rental company” and “rental agency”</p>
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Changes to your Certificate of Insurance, as of March 24, 2022

Benefit	Before	After
	<p><i>CDW</i> is not insurance. TAX-FREE CAR means a tax-free car package that provides <i>tourists</i> with a short-term (17 days to 6 months), tax-free vehicle lease agreement with a guaranteed buyback. The Collision/Loss Damage Insurance program will not provide coverage for Tax-free cars. <i>YOU/YOUR</i> means a TD Credit Card Cardholder whose name is embossed on the TD Credit Card or who is authorized to <i>Use</i> the TD Credit Card in accordance with the Cardholder Agreement.</p>	<p>refer to both traditional auto rental agencies and <i>Car Sharing</i> Programs. Rental Agency's CDW means an optional Collision Damage Waiver ("CDW") or similar coverage offered by car rental companies that relieves renters of financial responsibility if the car is damaged or stolen while under rental contract. <i>Rental Agency's CDW</i> is not insurance. Tax-free Car means a tax-free car package that provides tourists with a short-term (17 days to 6 months), tax-free vehicle lease agreement with a guaranteed buyback. The Collision/Loss Damage Insurance program will not provide coverage for <i>Tax-free Cars</i>.</p>

<p>Auto Rental Collision/Loss Damage Insurance</p>	<p>A. Collision/Loss Damage Insurance at a Glance • Only the Cardholder may rent a vehicle and decline the Rental Agency's collision damage waiver (CDW) or an 56 equivalent coverage offering. This coverage applies only to the <i>Insured Person's</i> personal and business Use of the rental vehicle. • <i>Your</i> TD Credit Card must be in <i>Good Standing</i>. • <i>You</i> must initiate and complete the entire rental transaction with the same TD Credit Card. • The full cost of the rental must be charged to <i>Your</i> TD Credit Card to activate coverage. • Coverage is limited to one rental vehicle at a time, i.e. if during the same period there is more than one vehicle rented by the Cardholder, only the first rental will be eligible for these benefits. • The length of time <i>You</i> rent the same vehicle or vehicles must not exceed forty-eight (48) consecutive days, which follow one immediately after the other. In order to break the consecutive day cycle, a full calendar day must exist between rental periods. If the rental period exceeds forty-eight (48) consecutive days, coverage will not be provided from the first day onwards, i.e. coverage will not be provided for either the first 48 consecutive days or any subsequent days. Coverage may not be extended for more than forty-eight (48) days by renewing or taking out a new rental agreement with the same or another <i>Rental Agency</i> for the same vehicle or another vehicle. • Coverage is limited to loss/damage to, or theft of a rental vehicle only up to the rental vehicle's actual cash value plus valid Loss of Use charges. • The Cardholder must decline on the rental contract the CDW option or its equivalent offered by the Rental Agency. (The Collision/Loss Damage Insurance coverage does not pay for the premium charged by the <i>Rental Agency</i> for the CDW offered by the Rental Agency.) • Most vehicles are covered by the Policy. (A list of vehicles excluded from this coverage is outlined in the section "Types of Vehicles Covered".) • The Collision/Loss Damage Insurance Program will provide coverage to Cardholders when the full cost of each rental of a vehicle (per Use and mileage charges) is paid for Using <i>Your</i> TD Credit Card and the <i>Car Sharing</i> Program's Collision/Loss Damage Insurance is declined. • Coverage is available except where prohibited by law. • Claims must be reported within forty-eight (48) hours of the damage/loss occurring by calling 1-866-374-1129 (when in Canada or the United States) or, call collect (416) 977-4425. PLEASE READ THE FOLLOWING COVERAGE DESCRIPTION CAREFULLY FOR MORE DETAILED INFORMATION ON CONDITIONS AND EXCLUSIONS. Collision/Loss Damage (CLD) Insurance provides coverage when <i>You Use Your</i> TD Credit Card to pay for a rental vehicle and decline the CDW (or an equivalent coverage) offered by the Rental Agency. There is no additional charge for the CLD Insurance. The coverage compensates <i>You</i> or a <i>Rental Agency</i></p>	<p>Section 4 – Description of Insurance Coverage Collision/Loss Damage Insurance at a Glance</p> <ul style="list-style-type: none"> • Only the <i>Cardholder</i> may rent a vehicle and decline the <i>Rental Agency's</i> CDW or an equivalent coverage offering. This coverage applies only to the <i>Insured Person's</i> personal and business use of the rental vehicle. • <i>Your</i> TD Credit Card must be in <i>Good Standing</i>. • <i>You</i> must initiate and complete the entire rental transaction with the same TD Credit Card. • The full cost of the rental must be charged to <i>Your</i> TD Credit Card to activate coverage. • Coverage is limited to one rental vehicle at a time; i.e., if during the same period there is more than one vehicle rented by the <i>Cardholder</i>, only the first rental will be eligible for these benefits. • The length of time <i>You</i> rent the same vehicle or vehicles must not exceed 48 consecutive days, which follow one immediately after the other. In order to break the consecutive day cycle, a full calendar day must exist between rental periods. If the rental period exceeds 48 consecutive days, coverage will not be provided from the first day onwards; e.g., coverage will not be provided for either the first 48 consecutive days or any subsequent days. Coverage may not be extended for more than 48 days by renewing or taking out a new rental agreement with the same or another <i>Rental Agency</i> for the same vehicle or another vehicle. • Coverage is limited to loss/damage to, or theft of a rental vehicle only up to the rental vehicle's actual cash value plus valid <i>Loss of Use</i> charges. • The <i>Cardholder</i> must decline on the rental contract the CDW option or its equivalent offered by the <i>Rental Agency</i>. (The Collision/Loss Damage Insurance coverage does not pay for the premium charged by the <i>Rental Agency</i> for the CDW offered by the <i>Rental Agency</i>.) • Most vehicles are covered by the Policy. (A list of vehicles excluded from this coverage is outlined in the subsection "Types of Vehicles Covered".) • Collision/Loss Damage (CLD) Insurance provides coverage when <i>You</i> use <i>Your</i> TD Credit Card to pay for the full cost of a rental vehicle and decline the CDW (or an equivalent coverage) offered by the <i>Rental Agency</i>. There is no additional charge for the CLD Insurance. The coverage compensates <i>You</i> or a <i>Rental Agency</i> for loss/damages up to the actual cash value of the rented vehicle and valid <i>Rental Agency</i> <i>Loss of Use</i> charges when the conditions described below are met. • Coverage is available except where prohibited by law. • Claims must be reported within 48 hours of the damage/loss occurring by calling 1-866-374-1129 (toll-free) from Canada or the U.S., or +1-416-977-4425 (collect) from other countries. <p>PLEASE READ THE FOLLOWING COVERAGE DESCRIPTION CAREFULLY FOR MORE DETAILED INFORMATION ON CONDITIONS AND EXCLUSIONS. CLD Insurance is primary insurance (except for losses that may be waived or assumed by the <i>Rental Agency</i> or their insurer, and in such circumstances where local government</p>
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Changes to your Certificate of Insurance, as of March 24, 2022

Benefit	Before	After
	<p>for loss/damages up to the actual cash value of the rented vehicle and valid <i>Rental Agency Loss of Use</i> charges when the conditions described below are met.</p>	<p>insurance legislation states otherwise) which pays the amount for which <i>You</i> are liable to the <i>Rental Agency</i> up to the actual cash value of the damaged or stolen rental vehicle as well as valid <i>Loss of Use</i> charges resulting from damage or theft occurring while <i>You</i> are the renter of the rental vehicle. The length of time <i>You</i> rent the same vehicle or vehicles must not exceed 48 consecutive days. If <i>You</i> rent the same vehicle or vehicles for more than 48 consecutive days, no coverage is provided for any part of your rental period.</p>

Changes to your Certificate of Insurance, as of March 24, 2022

Benefit	Before	After
<p>Auto Rental Collision/Loss Damage Insurance</p>	<p>B. Collision/Loss Damage Covers CLD Insurance is primary insurance (except for losses that may be waived or assumed by the <i>Rental Agency</i> or their insurer, and in such circumstances where local government insurance legislation states otherwise) which pays the amount for which <i>You</i> are liable to the <i>Rental Agency</i> up to the actual cash value of the damaged or stolen rental vehicle as Well as valid Loss of Use charges resulting from damage or theft occurring while <i>You</i> are the renter of the rental vehicle. The length of time <i>You</i> rent the same vehicle or vehicles must not exceed forty-eight (48) consecutive days. If <i>You</i> rent the same vehicle or vehicles for more than forty-eight (48) consecutive days, no coverage is provided for any part of <i>Your</i> rental period. This coverage does NOT include loss arising directly or indirectly from: 1. a replacement vehicle for which <i>Your</i> personal automobile insurance is covering all or part of the cost of the rental; 2. third party liability; 3. personal injury or damage to property, except the rental vehicle itself or its equipment; 4. the operation of the rental vehicle at any time during which any <i>Insured Person</i> is driving while intoxicated or under the influence of any narcotic; 5. any dishonest, fraudulent or criminal act committed by any <i>Insured Person</i>; 6. wear and tear, gradual deterioration, or mechanical or electrical breakdown or failure, inherent vice or damage, insects or vermin; 7. operation of the rental vehicle in violation of the terms of the rental agreement except: (a) <i>Insured Persons</i> as defined, may operate the rental vehicle; (b) the rental vehicle may be driven on publicly maintained gravel roads; (c) the rental vehicle may be driven across provincial and state boundaries in Canada and the U.S. and between Canada and the U.S. N.B. It must be noted that loss/damage arising while the vehicle is being operated under (a), (b) or (c) above is covered by this insurance. However, the Rental Agency's third party insurance will not be in force and, as such, <i>You</i> must ensure that <i>You</i> are adequately insured privately for third party liability. 8. seizure or destruction under a quarantine or customs regulations or confiscated by order of any government or public authority; 9. transportation of contraband or illegal trade; 10. war, hostile or warlike action, insurrection, rebellion, revolution, civil war, usurped power, or action taken by government or public authority in hindering, combatting or defending against such action; 11. transportation of property or passengers for hire; 12. nuclear reaction, nuclear radiation, or radioactive contamination; 13. intentional damage to the rental vehicle by an <i>Insured Person</i>.</p>	<p>Section 5 – Limitations and Exclusions Collision/Loss Damage (CLD) Insurance does NOT include loss arising directly or indirectly from:</p> <ol style="list-style-type: none"> 1. a replacement vehicle for which <i>Your</i> personal automobile insurance is covering all or part of the cost of the rental; 2. third-party liability; 3. personal injury or damage to property, except the rental vehicle itself or its equipment; 4. the operation of the rental vehicle at any time during which any <i>Insured Person</i> is driving while intoxicated or under the influence of any narcotic; 5. any dishonest, fraudulent or criminal act committed by any <i>Insured Person</i>; 6. wear and tear, gradual deterioration, or mechanical or electrical breakdown or failure, inherent vice or damage, insects or vermin; 7. operation of the rental vehicle in violation of the terms of the rental agreement except: <ol style="list-style-type: none"> a) <i>Insured Persons</i> as defined, may operate the rental vehicle; b) the rental vehicle may be driven on publicly maintained gravel roads; c) the rental vehicle may be driven across provincial and state boundaries in Canada and the U.S. and between Canada and the U.S. <p>NOTE: It must be noted that loss/damage arising while the vehicle is being operated, as described in #7, is covered by this insurance. However, the <i>Rental Agency's</i> third-party insurance will not be in force and, as such, <i>You</i> must ensure that <i>You</i> are adequately insured privately for third-party liability.</p> <ol style="list-style-type: none"> 8. seizure or destruction under a quarantine or customs regulations or confiscated by order of any government or public authority; 9. transportation of contraband or illegal trade; 10. war; or civil unrest; or an act of war, whether declared or undeclared; or hostile or warlike action in time of peace or war; or willing participation in a riot or civil unrest; or rebellion; or revolution; or insurrection; or any service in the armed forces while on duty; 11. transportation of property or passengers for hire; 12. nuclear reaction, nuclear radiation, or radioactive contamination; 13. intentional damage to the rental vehicle by an <i>Insured Person</i>.

Changes to your Certificate of Insurance, as of March 24, 2022

Benefit	Before	After
Auto Rental Collision/Loss Damage Insurance	<p>C. Who is Eligible for Coverage? <i>Insured Persons</i> as defined provided that: 1. <i>Your Card Account</i> privileges have not been terminated or suspended, and/or 2. <i>Your Card Account</i> is not more than ninety (90) days past due.</p>	<p>Section 2 – Eligibility Who is Eligible for Coverage? <i>Insured Persons</i> as defined provided that: 1. <i>Your Card Account</i> privileges have not been terminated or suspended; and 2. <i>Your Card Account</i> is not more than 90 days past due.</p>
Auto Rental Collision/Loss Damage Insurance	<p>D. Coverage Activation For coverage to be in effect, You must: 1. Use Your TD Credit Card to pay for the entire rental from a Rental Agency. 2. Decline the Rental Agency’s CDW option or similar coverage offered by the Rental Agency on the rental contract. If there is no space on the vehicle rental contract for You to indicate that You have declined the coverage, then indicate in writing on the contract “I decline CDW provided by this merchant”. • Rental vehicles which are part of prepaid travel packages are also covered if the total package was paid by Your TD Credit Card. • You are covered if You receive a “free rental” as a result of a promotion where You have had to make previous vehicle rentals and if each such previous rental was entirely paid for with Your TD Credit Card. • You are covered if You receive a “free rental” day(s) as a result of the Aeroplan program for the number of days of free rental (or similar TD Credit Card program). If the free rental day(s) are combined with rental days for which You pay the negotiated rate, this entire balance must be paid by Your TD Credit Card. • You are covered if Aeroplan points are used to obtain the rental. However, if only a partial payment is paid using Your Aeroplan points, the entire balance of that rental must be paid using Your TD Credit Card in order to be covered.</p>	<p>Coverage Activation For coverage to be in effect, You must: 1. Use <i>Your TD Credit Card</i> to pay for the entire rental from a <i>Rental Agency</i>. 2. Decline the <i>Rental Agency’s</i> CDW option or similar coverage offered by the <i>Rental Agency</i> on the rental contract. If there is no space on the vehicle rental contract for You to indicate that You have declined the coverage, then indicate in writing on the contract “I decline CDW provided by this merchant”. • Rental vehicles which are part of prepaid travel packages are also covered if the total package was paid by <i>Your TD Credit Card</i>. • You are covered if You receive a “free rental” as a result of a promotion where You have had to make previous vehicle rentals and if each such previous rental was entirely paid for with <i>Your TD Credit Card</i>. • You are covered if You receive a “free rental” day(s) as a result of the Aeroplan program for the number of days of free rental (or similar TD Credit Card program). If the free rental day(s) are combined with rental days for which You pay the negotiated rate, this entire balance must be paid by <i>Your TD Credit Card</i>. • You are covered if <i>Aeroplan Points</i> are used to obtain the rental. If partial payment is paid using <i>Your Aeroplan Points</i>, the remaining balance of that rental must be paid using <i>Your TD Credit Card</i> in order to be covered. Aeroplan Points or any other Frequent Flyer Plan Rewards Units Under no circumstances will any benefit be payable in connection with the value of Aeroplan Points or frequent flyer plan rewards units that have been lost or wasted.</p>
Auto Rental Collision/Loss Damage Insurance	<p>E. Coverage Termination There is NO Coverage when: 1. The <i>Rental Agency</i> reassumes control of the rental vehicle. 2. This Policy is cancelled. 3. <i>Your</i> rental period is more than forty-eight (48) consecutive days, or <i>Your</i> rental period is extended for more than forty-eight (48) consecutive days by renewing or taking out a new rental agreement with the same or another <i>Rental Agency</i> for the same vehicle or other vehicles. 4. <i>Your TD Credit Card</i> is cancelled or <i>Card</i> privileges are otherwise terminated</p>	<p>Section 6 – When Coverage Terminates No change.</p>

Changes to your Certificate of Insurance, as of March 24, 2022

Benefit	Before	After
Auto Rental Collision/Loss Damage Insurance	<p>F. Where Coverage is Available This coverage is available on a 24-hour basis unless precluded by law or the coverage is in violation of the terms of the rental contract in the jurisdiction in which it was formed (other than under section B, Part 7 (a) (b) or (c) above). (See the section on “Helpful Hints” for tips on locations where Use of this coverage may be challenged and what to do when a <i>Rental Agency</i> makes the rental or return of a vehicle difficult.)</p>	<p>Section 4 – Description of Insurance Coverage Where Coverage is Available This coverage is available on a 24-hour basis unless precluded by law or the coverage is in violation of the terms of the rental contract in the jurisdiction in which it was formed (other than described in Section 5 – “Limitations and Exclusions”, under #7). (See Section 9 – “Helpful Hints” for tips on locations where use of this coverage may be challenged and what to do when a <i>Rental Agency</i> makes the rental or return of a vehicle difficult.)</p>
Auto Rental Collision/Loss Damage Insurance	<p>G. Types of Vehicles Covered The types of rental vehicles covered include: All cars, sport utility vehicles, and Mini-Vans (defined as vans made by an automobile manufacturer and classified by the manufacturer or a government authority as Mini-Vans made to transport a maximum of eight (8) people including the driver and which are used exclusively for the transportation of passengers and their luggage) except those excluded below.</p>	<p>Section 4 – Description of Insurance Coverage Types of Vehicles Covered No change.</p>
Auto Rental Collision/Loss Damage Insurance	<p>The following vehicles are NOT covered:</p> <ol style="list-style-type: none"> 1. vans, cargo vans or mini cargo vans (other than Mini-Vans as described above); 2. trucks, pick-up trucks or any vehicle that can be spontaneously reconfigured into a pick-up truck; 3. limousines; 4. off-road vehicles – meaning any vehicle used on roads that are not publicly maintained roads unless used to ingress and egress private property; 5. motorcycles, mopeds or motor bikes; 6. trailers, campers, recreational vehicles or vehicles not licensed for road use; 7. vehicles towing or propelling trailers or any other object; 8. mini-buses or buses; 9. any vehicle with a Manufacturer’s Suggested Retail Price (MSRP) excluding all taxes, over sixty-five thousand dollars (\$65,000) Canadian, at the time and place of loss. 10. exotic vehicles, meaning vehicles such as Aston Martin, Bentley, Bricklin, Daimler, DeLorean, Excalibur, Ferrari, Jensen, Lamborghini, Lotus, Maserati, Porsche, Rolls Royce; 11. any vehicle which is either wholly or in part hand made, hand finished or has a limited production of under 2,500 vehicles per year; 12. antique vehicles, meaning a vehicle over twenty (20) years old or which has not been manufactured for ten (10) years or more. 13. Tax-free cars. <p>Luxury vehicles such as BMW, Cadillac, Lincoln and Mercedes Benz are covered as long as they meet the above requirements.</p>	<p>Section 5 – Limitations and Exclusions Vehicles that are NOT covered are: No change.</p>

<p>Auto Rental Collision/Loss Damage Insurance</p>	<p>IN THE EVENT OF AN ACCIDENT/THEFT • Within forty-eight (48) hours, call the <i>Administrator</i> toll-free 1-866-374-1129 if <i>You</i> are in Canada or the United States or call collect (416) 977-4425. The <i>Administrator's</i> representative will answer <i>Your</i> questions and send <i>You</i> a claim form. • Decide with the rental agent which one of <i>You</i> will make the claim. • If the rental agent decides to settle the claim directly, complete the accident report claim form and assign the right for the <i>Rental Agency</i> to make the claim on <i>Your</i> behalf on the claim form or other authorized forms. It is important to note that <i>You</i> remain responsible for the damage/loss and that <i>You</i> may be contacted in the future to answer inquiries resulting from the claims process. The rental agent may fax the required documentation toll-free if they are in Canada or the United States to 1-877-661-3566. When elsewhere the fax number is 1-519-742-9471. Original documentation may also be required in some instances. (If <i>You</i> have any questions, are having any difficulties, or would like the claims <i>Administrator</i> to be involved immediately, call the number provided above). • If <i>You</i> will be making the claim, <i>You</i> must call the claims <i>Administrator</i> within forty-eight (48) hours of the damage/theft having occurred. <i>Your</i> claim must be submitted with as much documentation, requested below, as possible within forty-five (45) days of discovering the loss/damage. <i>You</i> will need to provide all documentation within ninety (90) days of the date of damage or theft to the claims <i>Administrator</i>. • The following claim documentation is required: – the claim form, completed and signed – <i>Your</i> sales draft showing that the rental was paid in full with the TD Credit Card and/or proof of redemption – the original copy of the vehicle rental agreement – accident or damage report, if available – the itemized repair bill, or if not available, a copy of the estimate – receipt for paid repairs – police report, when available – copy of <i>Your</i> billing or pre-billing statement if any repair charges <i>Were</i> billed to <i>Your Account</i> Under normal circumstances, the claim will be paid within fifteen (15) days after the claims <i>Administrator</i> has received all necessary documentation. If the claim cannot be assessed on the basis of the information that has been provided, it will be closed. After the Company has paid <i>Your</i> claim, <i>Your</i> rights and recoveries will be transferred to the Company to the extent of the Company's payment for the loss/damage incurred when the rental vehicle was <i>Your</i> responsibility. This means the Company will then be entitled, at its own expense, to sue in <i>Your</i> name. If the Company chooses to sue another party in <i>Your</i> name, <i>You</i> must give the Company all the assistance the Company may reasonably require to secure its rights and remedies. This may include providing <i>Your</i> signature on all necessary documents that enable the</p>	<p>Section 7 – In the Event of an Accident/Theft</p> <ul style="list-style-type: none"> • Within 48 hours, call <i>Our Administrator</i> at 1-866-374-1129 (toll-free) from Canada or the U.S., or +1-416-977-4425 (collect) from other countries. <i>Our Administrator's</i> representative will answer <i>Your</i> questions and send <i>You</i> a claim form. • Decide with the rental agent which one of <i>You</i> will make the claim. <p>If the rental agent decides to settle the claim directly, complete the accident report claim form and assign the right for the <i>Rental Agency</i> to make the claim on <i>Your</i> behalf on the claim form or other authorized forms. It is important to note that <i>You</i> remain responsible for the damage/loss and that <i>You</i> may be contacted in the future to answer inquiries resulting from the claims process. The rental agent may fax the required documentation to +1-819-569-2814 (toll-free). Original documentation may also be required in some instances. (If <i>You</i> have any questions, are having any difficulties, or would like the claims <i>Administrator</i> to be involved immediately, call the number provided above).</p> <ul style="list-style-type: none"> • If <i>You</i> will be making the claim, <i>You</i> must call the claims <i>Administrator</i> within 48 hours of the damage/theft having occurred. <i>Your</i> claim must be submitted with as much documentation, as requested by <i>Our Administrator</i> below, within 45 days of discovering the loss/damage. <i>You</i> will need to provide all documentation within 90 days of the date of damage or theft to the claims <i>Administrator</i>. • The following claim documentation is required: <ul style="list-style-type: none"> • the claim form, completed and signed; • <i>Your</i> sales draft showing that the rental was paid in full with the TD Credit Card and/or proof of redemption; • the original copy of the vehicle rental agreement; • the accident or damage report, if available; • the itemized repair bill, or if not available, a copy of the estimate; • the receipt for paid repairs; • the police report, when available; • a copy of <i>Your</i> billing or pre-billing statement if any repair charges were billed to <i>Your Account</i>; • Under normal circumstances, the claim will be paid within 15 days after the claims <i>Administrator</i> has received all necessary documentation. If the claim cannot be assessed on the basis of the information that has been provided, it will be closed. After <i>Our Administrator</i> has paid <i>Your</i> claim, <i>Your</i> rights and recoveries will be transferred to the Insurer to the extent of <i>Our Administrator's</i> payment for the loss/damage incurred when the rental vehicle was <i>Your</i> responsibility. This means the Insurer will then be entitled, at its own expense, to sue in <i>Your</i> name. If the Insurer chooses to sue another party in <i>Your</i> name, <i>You</i> must give the Insurer all the assistance they may reasonably require to secure its rights and remedies. This may include providing <i>Your</i> signature on all necessary documents that enable the Insurer to sue in <i>Your</i> name. <p>Once <i>You</i> report damage, loss or theft, a claim file will be opened and will remain open for 6 months from the date of the damage or theft. Payment will only be made on a claim or any part of a claim that is completely substantiated</p>
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Changes to your Certificate of Insurance, as of March 24, 2022

Benefit	Before	After
	<p>Company to sue in <i>Your</i> name. Once <i>You</i> report damage, loss or theft, a claim file will be opened and will remain open for six (6) months from the date of the damage or theft. Payment will only be made on a claim or any part of a claim that is completely substantiated as required by the claims <i>Administrator</i> within six (6) months of the date of loss/damage. <i>You</i> should <i>Use</i> due diligence and do all things necessary to avoid or reduce any loss or damage to property protected by this Collision/Loss Damage Insurance. If <i>You</i> make a claim knowing it to be false or fraudulent in any respect, <i>You</i> will not be entitled to the benefits of this protection, nor to the payment of any claim made under this Policy</p>	<p>as required by the claims <i>Administrator</i> within 6 months of the date of loss/damage. <i>You</i> should use due diligence and do all things necessary to avoid or reduce any loss or damage to property protected by this Collision/Loss Damage Insurance. If <i>You</i> make a claim knowing it to be false or fraudulent in any respect, <i>You</i> will not be entitled to the benefits of this protection, nor to the payment of any claim made under this Policy.</p>
<p>Auto Rental Collision/Loss Damage Insurance</p>	<p>H. LEGAL ACTION LIMITATION PERIOD Every action or proceeding against the insurer for the recovery of insurance money payable under the contract is absolutely barred unless commenced within the time set out in the Insurance Act (for actions or proceedings governed by the laws of Alberta or British Columbia), The Insurance Act (for actions or proceedings governed by the laws of Manitoba), the Limitations Act, 2002 (for actions or proceedings governed by the laws of Ontario), the Civil Code of Quebec (for actions or proceedings governed by the laws of Quebec), or other applicable legislation.</p>	<p>Section 8 – General Conditions Legal Action Limitation Period Every action or proceeding against the Insurer for the recovery of insurance money payable under the contract is absolutely barred unless commenced within the time set out in the <i>Insurance Act</i> (for actions or proceedings governed by the laws of Alberta or British Columbia), <i>The Insurance Act</i> (for actions or proceedings governed by the laws of Manitoba), the <i>Limitations Act, 2002</i> (for actions or proceedings governed by the laws of Ontario), or other applicable legislation. For actions or proceedings governed by the laws of Quebec, the prescriptive period is set out in the <i>Civil Code of Quebec</i>.</p>

Changes to your Certificate of Insurance, as of March 24, 2022

Benefit	Before	After
Auto Rental Collision/Loss Damage Insurance	<p>Helpful Hints Before <i>You</i> rent a vehicle, find out if <i>You</i> are required to provide a deposit if <i>You</i> wish to decline the Rental Agency's CDW. If possible, select a <i>Rental Agency</i> which provides an excellent rate AND allows <i>You</i> to decline the CDW without having to make a deposit. Rental Agencies in some countries may resist <i>Your</i> declining their CDW coverage. These Rental Agencies may try to encourage <i>You</i> to take their coverage or to provide a deposit. If <i>You</i> experience difficulty Using <i>Your</i> CLD Insurance coverage, please call toll-free 1-866-374-1129 if <i>You</i> are in Canada or the United States or, call collect (416) 977-4425 and provide: • the name of the <i>Rental Agency</i> involved, • the Rental Agency's address, • the date of the rental, • the name of the <i>Rental Agency</i> representative with whom <i>You</i> spoke, and <i>Your</i> rental contract number. The <i>Rental Agency</i> will then be contacted and acquainted with the CLD Insurance coverage. In certain locations, the law requires that Rental Agencies provide Collision Damage Coverage in the price of the vehicle rental. In these locations (and in Costa Rica or elsewhere where Cardholders may be required to accept CDW), the CLD Insurance will provide coverage for any required deductible provided that all the procedures outlined in the <i>Certificate</i> are followed and the Rental Agency's Deductible Waiver has been declined on the rental contract. <i>You</i> will not be compensated for any payment <i>You</i> may have made to obtain the Rental Agency's CDW. Check the rental vehicle carefully for scratches or dents before and after <i>You</i> drive the vehicle. Be sure to point out where the scratches or dents are located to a <i>Rental Agency</i> representative. 61 If the vehicle has sustained damage of any kind, immediately phone one of the numbers provided and do not sign a blank sales draft to cover the damage and Loss of <i>Use</i> charges or, a sales draft with an estimated cost of repair and Loss of <i>Use</i> charges. The rental agent may make a claim on <i>Your</i> behalf to recover repair and Loss of <i>Use</i> charges by following the procedures outlined in the section "In the Event of an Accident/Theft".</p>	<p>Section 9 – Helpful Hints No change.</p>
Purchase Security and Extended Warranty Protection	<p>Coverage under this <i>Certificate</i> is provided by: TD Home and Auto Insurance Company (Insurer) 320 Front Street West, 3rd Floor, Toronto, ON M5V 3B6</p>	<p>Coverage under this Certificate is provided by: TD Home and Auto Insurance Company ("Insurer") P.O. Box 1, TD Centre, Toronto, ON M5K 1A2</p>
Purchase Security and Extended Warranty Protection	<p>Administration services are provided by: Allianz Global Assistance (<i>Administrator</i>) P.O. Box 277, Waterloo, ON N2J 4A4 Phone: 1-866-374-1129 or (416) 977-4425</p>	<p>Claims administration and adjudication services are provided by: Global Excel Management Inc. ("Administrator") 73 Queen Street, Sherbrooke, QC J1M 0C9 Phone: 1-866-374-1129 or +1-416-977-4425</p>

Changes to your Certificate of Insurance, as of March 24, 2022

Benefit	Before	After
<p>Purchase Security and Extended Warranty Protection</p>	<p>The <i>Certificate</i> of Insurance below applies to the TD Aeroplan Visa Infinite Privilege Card which will be referred to as a “TD Credit Card” throughout the <i>Certificate</i>. This <i>Certificate</i> contains a clause which may limit the amount payable. <i>Certificate</i> of Insurance The terms of the TD Credit Card Purchase Security and Extended Warranty Protection Group Policy #TDVP112008 (the Master Policy) issued by TD Home and Auto Insurance Company (Insurer) to The Toronto-Dominion Bank are described in this <i>Certificate</i>. Please note that in Alberta, Statutory Conditions are deemed to be part of every contract that include insurance against loss or damage to property and said Statutory Conditions are included in the Group Policy. <i>Our Administrator</i> administers the insurance on behalf of TD Home and Auto Insurance Company, and provides claims assistance, claims payment and administrative services under the Group Policy. Words in italics in this <i>Certificate</i> are defined in section 1.</p>	<p>Section 1 – Introduction Certificate of Insurance The <i>Certificate</i> of Insurance (“<i>Certificate</i>”) below applies to the TD Aeroplan Visa Infinite Privilege Card, which will be referred to as a “TD Credit Card” throughout the <i>Certificate</i>. Note: This insurance is excess insurance, meaning that any other sources of recovery <i>You</i> have will pay first, and this insurance policy will be the last to pay. For example, if <i>You’re</i> covered under home insurance, <i>You</i> will be eligible for the amount of the deductible under this <i>Certificate</i>. Claims administration and adjudication services are provided by Global Excel Management Inc. The terms of the TD Credit Card Purchase Security and Extended Warranty Protection Group Policy #TDVP112008 (“Group Policy”) issued by TD Home and Auto Insurance Company (“Insurer”) to The Toronto-Dominion Bank are described in this <i>Certificate</i>. Please note that in Alberta, Statutory Conditions are deemed to be part of every contract that includes insurance against loss or damage to property and said Statutory Conditions are included in the Group Policy.</p>
<p>Purchase Security and Extended Warranty Protection</p>	<p>Section 1 – Definitions <i>ACCOUNT(S)</i> means <i>Your</i> TD Credit Card <i>Account</i> accessed <i>Using Your</i> TD Credit Card or TD Visa Cheque. <i>ACCOUNT HOLDER</i> means the <i>Primary Cardholder</i> to whom the monthly <i>Account</i> statement is issued and who is a resident of Canada, and any <i>Additional Cardholder</i> who is a resident of Canada. The <i>Account Holder</i> may be referred herein as “<i>You</i>” or “<i>Your</i>”. <i>ADDITIONAL CARDHOLDER</i> means a person to whom a TD Credit Card has been issued at the authorization of the <i>Primary Cardholder</i>. <i>ADMINISTRATOR</i> means the service provider arranged by the Insurer to provide claims payment and administrative services under the Policy. <i>INSURED ITEM</i> means a new item of personal property (a pair or set being one item) for personal <i>Use</i> for which at least 75% of the <i>Purchase Price</i> has been charged to the <i>Account</i> of the <i>Account Holder</i>. <i>MANUFACTURER’S WARRANTY</i> means an express written warranty issued by or on behalf of the manufacturer of the <i>Insured Item</i> at the point of sale at the time of purchase of an <i>Insured Item</i>. The <i>Manufacturer’s Warranty</i> must be valid in Canada. 62 <i>PRIMARY CARDHOLDER</i> means a person who applied for a TD Credit Card, whose name is on the <i>Account</i> and to whom a TD Credit Card has been issued. <i>PURCHASE PRICE</i> means the actual cost to the <i>Account Holder</i> of the <i>Insured Item</i>, including any applicable sales tax. <i>SPOUSE</i> means: i) a person to whom the <i>Account Holder</i> is lawfully married; or ii) the designated partner where such partner has been domiciled with the <i>Account Holder</i> for at least one year and is publicly represented as the <i>Account Holder’s Spouse</i>.</p>	<p>Section 2 – Definitions In this <i>Certificate</i>, the following words and phrases shown in italics and capitalized have the meanings shown below. As <i>You</i> read through the <i>Certificate</i>, <i>You</i> may need to refer to this Section to ensure <i>You</i> have a full understanding of <i>Your</i> coverage, limitations and exclusions. Account means the <i>Primary Cardholder’s</i> TD Credit Card <i>Account</i> that the Bank maintains. Account Holder means the <i>Primary Cardholder</i> to whom the monthly <i>Account</i> statement is issued and who is a resident of Canada, and any <i>Additional Cardholder</i> who is a resident of Canada. The <i>Account Holder</i> may be referred herein as “<i>You</i>” or “<i>Your</i>”. Additional Cardholder means a person to whom a TD Credit Card has been issued at the authorization of the <i>Primary Cardholder</i>. Insured Item means a new item of personal property (a pair or set being one item) for personal use for which at least 75% of the <i>Purchase Price</i> has been charged to the <i>Account</i> of the <i>Account Holder</i>. Manufacturer’s Warranty means an express written warranty issued by or on behalf of the manufacturer of the <i>Insured Item</i> at the point of sale at the time of purchase of an <i>Insured Item</i>. The <i>Manufacturer’s Warranty</i> must be valid in Canada. Primary Cardholder means a person who applied for a TD Credit Card, whose name is on the <i>Account</i> and to whom a TD Credit Card has been issued. A <i>Primary Cardholder</i> does not include an <i>Additional Cardholder</i>. Purchase Price means the actual cost to the <i>Account Holder</i> of the <i>Insured Item</i>, including any applicable sales tax. Spouse means: • the person who the <i>Account Holder</i> is legally married to; or • the person the <i>Account Holder</i> has lived with for at least 1 continuous year in the same household and publicly refers to as their partner.</p>

Changes to your Certificate of Insurance, as of March 24, 2022

Benefit	Before	After
<p>Purchase Security and Extended Warranty Protection</p>	<p>Section 2 – What are the Insurance Benefits (a) Purchase Security The Purchase Security Plan automatically protects most Insured Items purchased with the TD Credit Card for one hundred and twenty (120) days from purchase for all risk of direct physical loss or damage, except as herein provided, anywhere in the world, in excess of other applicable insurance. If the item is lost, stolen or damaged, it will be replaced or repaired, or the <i>Account Holder</i> will be reimbursed for the <i>Purchase Price</i>. This protection is provided at no additional cost and is in effect for purchases made on or after December 1, 2008. (b) Extended Warranty Protection (i) The Extended Warranty Protection Plan automatically provides extended warranty coverage for Insured Items, such coverage to commence immediately following the expiry of the applicable <i>Manufacturer’s Warranty</i> for an additional period equal to two (2) times the period of the <i>Manufacturer’s Warranty</i> coverage or two (2) years, whichever is the lesser on most items purchased with the TD Credit Card as long as there is a <i>Manufacturer’s Warranty</i> valid in Canada (automatic coverage is limited to warranties five years or less.) <i>Manufacturer’s Warranties</i> greater than five years are covered if registered with the <i>Administrator</i> within the first year after purchase of the item. (ii) To register an Insured Item with a warranty greater than five (5) years for Extended Warranty Protection, the <i>Account Holder</i> must contact the <i>Administrator</i> and provide: • a copy of the sales receipt; • Credit Card record of charge or Credit Card statement; • serial number of the item, if available; • original <i>Manufacturer’s Warranty</i> valid in Canada; and • description of the product. This protection is provided at no additional cost and is in effect for purchases made on or after December 1, 2008.</p>	<p>Section 3 – Description of Insurance Coverage</p> <p>a) Purchase Security Purchase Security automatically protects most <i>Insured Items</i> purchased with the TD Credit Card for 120 days from purchase for all risk of direct physical loss or damage, except as herein provided, anywhere in the world, in excess of other applicable insurance. If the item is lost, stolen or damaged, it will be replaced or repaired, or the <i>Account Holder</i> will be reimbursed for the <i>Purchase Price</i>.</p> <p>b) Extended Warranty Protection</p> <p>(i) Extended Warranty Protection automatically provides extended warranty coverage for <i>Insured Items</i>, such coverage to commence immediately following the expiry of the applicable <i>Manufacturer’s Warranty</i> for an additional period equal to 2 times the period of the <i>Manufacturer’s Warranty</i> coverage or 2 years, whichever is the lesser on most items purchased with the TD Credit Card as long as there is a <i>Manufacturer’s Warranty</i> valid in Canada (automatic coverage is limited to warranties 5 years or less). <i>Manufacturer’s Warranties</i> greater than 5 years are covered if registered with the <i>Administrator</i> within the first year after purchase of the item.</p> <p>(ii) To register an <i>Insured Item</i> with a warranty greater than 5 years for Extended Warranty Protection, the <i>Account Holder</i> must contact the <i>Administrator</i> and provide:</p> <ul style="list-style-type: none"> • a copy of the sales receipt; • a Credit Card record of charge or Credit Card statement; • the serial number of the item, if available; • the original <i>Manufacturer’s Warranty</i> valid in Canada; and <p>• a description of the product.</p>
<p>Purchase Security and Extended Warranty Protection</p>	<p>Section 3 – Policy Limits There is a maximum aggregate lifetime benefit per <i>Account Holder</i> of \$60,000 for all TD Credit Cards of the <i>Account Holder</i>. The <i>Account Holder</i> will be entitled to receive no more than the full <i>Purchase Price</i> of the Insured Item as recorded on the <i>Account</i> receipt or <i>Account</i> statement. Claims for items belonging to a pair or set will be paid for at the <i>Purchase Price</i> of the pair or set provided the parts of the pair or set are unusable individually and cannot be replaced individually. The <i>Administrator</i>, at its sole option, may elect to: (a) Repair, rebuild or replace the item lost or damaged (whether wholly or in part), upon notifying the <i>Account Holder</i> of its intention to do so within forty-five (45) days following receipt of the required Loss Report; or (b) Pay cash for said item, not exceeding the full <i>Purchase Price</i> thereof paid Using the <i>Account</i> and subject to the exclusions, terms and limits of liability as stated in this <i>Certificate</i>.</p>	<p>Section 4 – Policy Limits</p> <p>No change.</p>

<p>Purchase Security and Extended Warranty Protection</p>	<p>Section 4 – Exclusions Any loss or damage of any aspect of any product, device, or equipment to function properly as caused by any change in date will be excluded. This exclusion applies to Purchase Security and to Extended Warranty Protection.</p> <p>Purchase Security (a) Coverage is not extended to loss or damage to the following: (i) cash or its equivalent, travelers cheques, <i>Tickets</i> and any negotiable instruments; (ii) art objects, bullion, rare or precious coins; (iii) perishables, animals or living plants; (iv) jewelry and watches in baggage unless carried by hand and under the personal supervision of the <i>Account Holder</i> or <i>Account Holder's Travelling Companion</i> previously known to the <i>Account Holder</i>; (v) automobiles, motorboats, aircrafts, motorcycles, drones, motor scooters and other motorized vehicles, parts and accessories thereof; (vi) ancillary costs incurred in respect of an Insured Item and not forming part of the Purchase Price; (vii) parts and/or labor required as a result of mechanical breakdown; (viii) Used and pre-owned items including antiques and demos; (ix) any item purchased by and/or Used for a business or commercial purpose; (x) items consumed in Use; and (xi) services.</p> <p>(b) Loss or damage resulting from the following perils are excluded from coverage: (i) abuse or fraud; (ii) flood or earthquake; (iii) war, invasion, hostilities, rebellion, insurrection, terrorism, confiscation by authorities, contraband or illegal activity; (iv) normal Wear and tear; (v) mysterious disappearance (Used herein to mean disappearance in an unexplained manner marked by an absence of evidence of the wrongful act of another); (vi) radioactive contamination; (vii) inherent product defects; (viii) normal course of play; or (ix) willful acts or omissions; and (x) indirect, incidental or consequential damages, including bodily injury, property damage, economic loss, punitive or exemplary damages and legal costs are not covered.</p> <p>Extended Warranty Protection In addition to any exclusions which may be set out in the Manufacturer's Warranty, this <i>Certificate</i> does not cover: (i) wear and tear, gradual reduction in operating performance, negligence, misuse and abuse; (ii) automobiles, motor boats, aircraft, motorcycles, drones, motor scooters and other motorized vehicles and parts and accessories thereof; (iii) willful acts or omissions and improper installation or alteration; (iv) ancillary costs; (v) used or pre-owned items including demos; (vi) any item purchased by and/or used for a business or commercial purpose; and (vii) consequential damages, including bodily injury, property damages, economic loss, punitive or exemplary damages and legal costs are not covered; (viii) inherent product defects.</p>	<p>Section 5 – Exclusions Any loss or damage of any aspect of any product, device, or equipment to function properly as caused by any change in date will be excluded. This exclusion applies to Purchase Security and to Extended Warranty Protection.</p> <p>Purchase Security (a) Coverage is not extended to loss or damage to the following: 1. cash or its equivalent, travellers cheques, tickets and any negotiable instruments; 2. art objects, bullion, rare or precious coins; 3. perishables, animals or living plants; 4. jewellery and watches in baggage unless carried by hand and under the personal supervision of the <i>Account Holder</i> or <i>Account Holder's</i> travelling companion previously known to the <i>Account Holder</i>; 5. automobiles, motorboats, aircrafts, motorcycles, drones, motor scooters and other motorized vehicles, parts and accessories thereof; 6. ancillary costs incurred in respect of an <i>Insured Item</i> and not forming part of the <i>Purchase Price</i>; 7. parts and/or labour required as a result of mechanical breakdown; 8. used and pre-owned items, including antiques and demos; 9. any item purchased by and/or used for a business or commercial purpose; 10. items consumed in use; and 11. services.</p> <p>(b) Loss or damage resulting from the following perils are excluded from coverage: 1. abuse or fraud; 2. flood or earthquake; 3. war, invasion, hostilities, rebellion, insurrection, terrorism, confiscation by authorities, contraband or illegal activity; 4. normal wear and tear; 5. mysterious disappearance (used herein to mean disappearance in an unexplained manner marked by an absence of evidence of the wrongful act of another); 6. radioactive contamination; 7. inherent product defects; 8. normal course of play; 9. willful acts or omissions; and 10. indirect, incidental or consequential damages, including bodily injury, property damage, economic loss, punitive or exemplary damages and legal costs are not covered.</p> <p>Extended Warranty Protection In addition to any exclusions which may be set out in the <i>Manufacturer's Warranty</i>, this <i>Certificate</i> does not cover: 1. wear and tear, gradual reduction in operating performance, negligence, misuse and abuse; 2. automobiles, motor boats, aircraft, motorcycles, drones, motor scooters and other motorized vehicles and parts and accessories thereof; 3. willful acts or omissions and improper installation or alteration; 4. ancillary costs; 5. used or pre-owned items, including demos; 6. any item purchased by and/or used for a business or commercial purpose; and 7. consequential damages, including bodily injury, property damages, economic loss, punitive or exemplary damages and legal costs are not covered; 8. inherent product defects.</p>
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Changes to your Certificate of Insurance, as of March 24, 2022

Benefit	Before	After
<p>Purchase Security and Extended Warranty Protection</p>	<p>Section 5 – Claims The <i>Account Holder</i> must furnish the <i>Administrator</i> with proof of loss. This shall include a signed Loss Report. (a)Initial Notification If <i>You</i> have incurred a loss covered under the Purchase Security or Extended Warranty Protection Plans, <i>You</i> must give notice by contacting the <i>Administrator</i> within forty-five (45) days from the date of loss or damage. Call toll-free between 8:00 a.m. and 8:00 p.m. Eastern Time, Monday to Saturday: 1-866-374-1129 or (416) 977-4425 The <i>Account Holder</i> will be asked to provide or, if writing, should provide: • name, address and telephone number • <i>Account</i> number Used to purchase the Insured Item • description of the Insured Item and • date, place, amount and cause of the loss or damage. (b)Written Proof (i) Purchase Security In the event of a claim covered under the Purchase Security Plan, a Loss Report will be mailed by the <i>Administrator</i>. Complete in full and return within ninety (90) days from the date of loss or damage. The Loss Report shall include but may not be limited to: • copy of the <i>Account</i> charge receipt and/or <i>Account</i> statement • a copy of the store receipt • serial number of the Insured Item (where applicable) and • any other information reasonably required by the <i>Administrator</i> such as a police or insurance claim report. (ii) Extended Warranty Protection <i>You</i> must report the claim information as detailed above prior to proceeding with the repair or replacement. The <i>Administrator</i> will: 1. Authorize the repair, if appropriate; and 2. Ask the <i>Account Holder</i> to: • return the Insured Item to the manufacturer’s service dealer as specified on the Manufacturer’s Warranty; • have the authorized dealer contact the Insurer; and if repairable • pay for the repair and submit: – a copy of the <i>Account</i> charge receipt and/or <i>Account</i> statement; – a copy of the paid repair invoice; 65 – a copy of the store receipt; – serial number of the Insured Item; and – a copy of the Manufacturer’s Warranty. In the event that the damaged Insured Item is not repairable, submit all applicable information to the <i>Administrator</i> as outlined above. The <i>Administrator</i> may require the <i>Account Holder</i>, at the <i>Account Holder</i>’s expense, to send the damaged Insured Item to an address designated by the <i>Administrator</i>. If the claim is made in respect of an Insured Item which is a gift, the claim may be made by the <i>Account Holder</i> or the recipient of the gift subject to compliance with the terms and conditions of the <i>Certificate</i>.</p>	<p>Section 6 – How to Submit a Claim Who to Contact to Submit a Claim To submit a claim, please contact <i>Our Administrator</i> at 1-866-374-1129 (toll-free) or +1-416-977-4425 (collect) between 8:00 a.m. and 8:00 p.m. ET, Monday to Friday. Provide the Information requested: (a) Initial Notification If <i>You</i> have incurred a loss covered under the Purchase Security or Extended Warranty Protection, <i>You</i> must give notice by contacting the <i>Administrator</i> within 45 days from the date of loss or damage. The <i>Account Holder</i> will be asked to provide or, if writing, should provide: • the name, address and telephone number; • the <i>Account</i> number used to purchase the <i>Insured Item</i>; • the description of the <i>Insured Item</i>; and • the date, place, amount and cause of the loss or damage. (b) Written Proof (i) Purchase Security A Loss Report will be mailed by the <i>Administrator</i>. Complete in full, sign and return within 90 days from the date of loss or damage. The Loss Report shall include but may not be limited to: • a copy of the <i>Account</i> charge receipt and/or <i>Account</i> statement; • a copy of the store receipt; • the serial number of the <i>Insured Item</i> (where applicable); and • any other information reasonably required by the <i>Administrator</i> such as a police or insurance claim report. (ii) Extended Warranty Protection <i>You</i> must report the claim information as detailed above prior to proceeding with the repair or replacement. The <i>Administrator</i> will: 1. Authorize the repair, if appropriate; and and 2. Ask the <i>Account Holder</i> to: • return the <i>Insured Item</i> to the manufacturer’s service dealer as specified on the <i>Manufacturer’s Warranty</i>; • have the authorized dealer contact the Insurer; and • if repairable, pay for the repair and submit: o a copy of the <i>Account</i> charge receipt and/or <i>Account</i> statement; o a copy of the paid repair invoice; o a copy of the store receipt; o the serial number of the <i>Insured Item</i>; and o a copy of the <i>Manufacturer’s Warranty</i>. In the event that the damaged <i>Insured Item</i> is not repairable, submit all applicable information to the <i>Administrator</i> as outlined above. The <i>Administrator</i> may require the <i>Account Holder</i>, at the <i>Account Holder</i>’s expense, to send the damaged <i>Insured Item</i> to an address designated by the <i>Administrator</i>. If the claim is made in respect of an <i>Insured Item</i> which is a gift, the claim may be made by the <i>Account Holder</i> or the recipient of the gift subject to compliance with the terms and conditions of the <i>Certificate</i>.</p>

Changes to your Certificate of Insurance, as of March 24, 2022

Benefit	Before	After
Purchase Security and Extended Warranty Protection	<p>Section 6 – Termination of Insurance This coverage terminates on the earliest of the following: a) When <i>Your Account</i> is closed; b) When <i>Your Account</i> is ninety (90) or more days past due but coverage is automatically reinstated when the <i>Account</i> is returned to <i>Good Standing</i>; and c) When the Master Policy is cancelled except that the Insurer will remain liable for the claim if the event giving rise to the claim occurred prior to the effective termination date and the claim is otherwise valid.</p>	<p>Section 7 – When Your Coverage Terminates This coverage terminates on the earliest of the following: a) When <i>Your Account</i> is closed; b) When <i>Your Account</i> is 90 or more days past due but coverage is automatically reinstated when the <i>Account</i> is returned to good standing; and c) The date the Group Policy terminates.</p>

<p>Purchase Security and Extended Warranty Protection</p>	<p>Section 7 – General Conditions OTHER INSURANCE. All of <i>Our</i> policies are excess insurance, meaning that any other <i>sources</i> of recovery <i>You</i> have will pay first, and this insurance policy will be the last to pay. The total benefits payable under all <i>Your</i> insurance, including this <i>Certificate</i>, cannot be more than the actual expenses for a claim. If an <i>Insured Person</i> is also insured under any other insurance <i>Certificate</i> or policy, <i>We</i> will coordinate payment of benefits with the other insurer. SUBROGATION. Following the Insurer’s payment of an <i>Account Holder’s</i> claim or loss or damage the Insurer shall be subrogated to the extent of the cost of such payment, to all rights and remedies of the <i>Account Holder</i> against any party in respect of such loss or damage, and shall be entitled at its own expense to sue in the name of the <i>Account Holder</i>. The <i>Account Holder</i> shall give the Insurer all such assistance as the Insurer may reasonably require to secure its rights and remedies, including the execution of all documents necessary to enable the Insurer to bring suit in the name of the <i>Account Holder</i>. BENEFITS ACCOUNT HOLDER ONLY. This protection provided by the Purchase Security and Extended Warranty Protection Plans shall inure to the benefit of the <i>Account Holder</i>. No other person or entity shall have any right, remedy or claim, legal or equitable, to the benefits. DUE DILIGENCE. The <i>Account Holder</i> shall <i>Use</i> due diligence and do all things reasonable to avoid or diminish any loss of or damage to property protected by the Master Policy. Where damage or loss is due to a malicious act, burglary, robbery, theft or attempt thereat, or is suspected to be so due, the <i>Account Holder</i> shall give immediate notice to the police or other authorities having jurisdiction. The Insurer will require evidence of such notice with the Loss Report prior to settlement of a claim. FALSE CLAIM. If an <i>Account Holder</i> makes any claim knowing it to be false or fraudulent in any respect, such <i>Account Holder</i> shall no longer be entitled to the benefits of this protection or to the payment of any claim made under the Master Policy. LEGAL ACTION LIMITATION PERIOD. Every action or proceeding against the insurer for the recovery of insurance money payable under the contract is absolutely barred unless commenced within the time set out in the Insurance Act (for actions or proceedings governed by the laws of Alberta or British Columbia), The Insurance Act (for actions or 66 proceedings governed by the laws of Manitoba), the Limitations Act, 2002 (for actions or proceedings governed by the laws of Ontario), the Civil Code of Quebec (for actions or proceedings governed by the laws of Quebec), or other applicable legislation. MASTER POLICY. This <i>Certificate</i> is not a Policy of Insurance. In the event of any conflict between this description of coverage and the Master Policy, the terms and conditions of the Master Policy will</p>	<p>Section 8 – General Conditions Benefits Account Holder Only This protection provided by the Purchase Security and Extended Warranty Protection Plans shall inure to the benefit of the <i>Account Holder</i>. No other person or entity shall have any right, remedy or claim, legal or equitable, to the benefits. Currency All amounts shown are in Canadian currency. Due Diligence The <i>Account Holder</i> shall use due diligence and do all things reasonable to avoid or diminish any loss of or damage to property protected by the Master Policy. Where damage or loss is due to a malicious act, burglary, robbery, theft or attempt thereat, or is suspected to be so due, the <i>Account Holder</i> shall give immediate notice to the police or other authorities having jurisdiction. The Insurer will require evidence of such notice with the Loss Report prior to settlement of a claim. False Claim If an <i>Account Holder</i> makes any claim knowing it to be false or fraudulent in any respect, such <i>Account Holder</i> shall no longer be entitled to the benefits of this protection or to the payment of any claim made under the Master Policy. Group Policy All benefits under this <i>Certificate</i> are subject in every respect to the Group Policy, which alone constitutes the agreement under which benefits will be provided. This Group Policy is issued to the <i>Bank</i>. The principal provisions of the Group Policy affecting <i>Account Holders</i> are summarized in this <i>Certificate</i>. The Group Policy is on file at the office of the <i>Bank</i>. Legal Action Limitation Period Every action or proceeding against the Insurer for the recovery of insurance money payable under the contract is absolutely barred unless commenced within the time set out in the <i>Insurance Act</i> (for actions or proceedings governed by the laws of Alberta or British Columbia), <i>The Insurance Act</i> (for actions or proceedings governed by the laws of Manitoba), the <i>Limitations Act, 2002</i> (for actions or proceedings governed by the laws of Ontario), or other applicable legislation. For actions or proceedings governed by the laws of Quebec, the prescriptive period is set out in the <i>Civil Code of Quebec</i>. Other insurance All of <i>Our</i> coverages are excess insurance, meaning that any other sources of recovery <i>You</i> have will pay first, and this insurance policy will be the last to pay. The total benefits payable under all <i>Your</i> insurance, including this <i>Certificate</i>, cannot be more than the actual expenses for a claim. If an <i>Account Holder</i> is also insured under any other insurance certificate or policy, <i>We</i> will coordinate payment of benefits with the other insurer. Subrogation Following the Insurer’s payment of an <i>Account Holder’s</i> claim or loss or damage, the Insurer shall be subrogated to the extent of the cost of such payment, to all rights and remedies of the <i>Account Holder</i> against any party in respect of such loss or damage, and shall be entitled at its own expense to sue in the name of the <i>Account Holder</i>. The <i>Account Holder</i> shall give the Insurer all such assistance as the Insurer may reasonably require to secure its rights and remedies, including the execution of all documents necessary to enable the Insurer to bring suit in the name of the <i>Account Holder</i>.</p>
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Changes to your Certificate of Insurance, as of March 24, 2022

Benefit	Before	After
	govern. In no event does possession of multiple <i>Certificates</i>	
Flight/Trip Delay Insurance	Coverage under this <i>Certificate</i> is provided by: TD Home and Auto Insurance Company (Insurer) 320 Front Street West, 3rd Floor, Toronto, ON M5V 3B6	Coverage under this Certificate is provided by: TD Home and Auto Insurance Company (“Insurer”) P.O. Box 1, TD Centre, Toronto, ON M5K 1A2
Flight/Trip Delay Insurance	Administration services are provided by: Allianz Global Assistance (<i>Administrator</i>) P.O. Box 277, Waterloo, ON N2J 4A4 Phone: 1-866-374-1129 or (416) 977-4425	Claims administration and adjudication services are provided by: Global Excel Management Inc. (“Administrator”) 73 Queen Street, Sherbrooke, QC J1M 0C9 Phone: 1-866-374-1129 or +1-416-977-4425
Flight/Trip Delay Insurance	The <i>Certificate</i> of Insurance below applies to the TD Aeroplan Visa Infinite Privilege Card which will be referred to as a “TD Credit Card” throughout the <i>Certificate</i> : <i>Certificate</i> of Insurance TD Home and Auto Insurance Company (“TDH&A”) provides the insurance for this <i>Certificate</i> under Master Policy #TGV010 (the “Policy”) issued to The Toronto-Dominion <i>Bank</i> . This Insurance is administered by Allianz Global Assistance (“Allianz”) through the Operations Centre. Allianz administers the insurance on behalf of TDH&A, and provides claims assistance, claims payment and administrative services under the Policy. This <i>Certificate</i> contains a clause which may limit the amount payable Words in italics in this <i>Certificate</i> are defined in section 1.	Section 1 – Introduction Certificate of Insurance Claims administration and adjudication services are provided by Global Excel Management Inc. The <i>Certificate</i> below applies to the TD Aeroplan Visa Infinite Privilege Card, which will be referred to as a “TD Credit Card” throughout the <i>Certificate</i> . TD Home and Auto Insurance Company (“TDH&A”) provides the insurance for this <i>Certificate</i> under Master Policy #TGV010 (the “Policy”) issued to The Toronto-Dominion Bank. This <i>Certificate</i> contains a clause which may limit the amount payable. How to contact Us: <i>You</i> may contact <i>Our Administrator</i> by calling: 1-866-374-1129 (toll-free) from Canada or the U.S. or +1-416-977-4425 (collect) from other countries.

<p>Flight/Trip Delay Insurance</p>	<p>SECTION 1 – DEFINITIONS <i>ACCOUNT</i> means <i>Your</i> TD Credit Card <i>Account</i> accessed <i>Using</i> <i>Your</i> TD Credit Card or TD Visa Cheque. <i>ACCOUNT HOLDER</i> means the <i>Primary Cardholder</i> to whom the monthly <i>Account</i> statement is issued, and who is a resident of Canada and any <i>Additional Cardholder</i> who is resident of Canada. The <i>Account Holder</i> may be referred to herein <i>Using</i> “<i>You</i>” and “<i>Your</i>”. <i>ADDITIONAL CARDHOLDER</i> means a person to whom a TD Credit Card has been issued at the authorization of the <i>Primary Cardholder</i>. <i>COMMON CARRIER</i> means any licensed land, water or air conveyance operated by those whose occupation or business is transportation of persons or things without discrimination for hire. <i>Common Carrier</i> is extended to include any Airline having a Charter Air Carrier’s License or its equivalent, provided it maintains regularly scheduled flights and publishes timetables and fares consistent with Scheduled Airline practices and provided the aircraft is limited to fixed-wing turbo-prop or jet Aircraft. Rafts, amusement park rides, jet skis, balloons, ski lifts and hang-gliders are not considered to be a <i>Common Carrier</i>. <i>COVERED TRIP</i> means travel on a <i>Common Carrier</i>, the fare for which at least 75% has been charged to <i>Your Account</i> and/or <i>Using</i> <i>Your</i> <i>Aeroplan Points</i>. <i>DEPENDENT CHILD(REN)</i> means those children residing with the <i>Account Holder</i>, under the age of twenty-two (22) and unmarried, who are primarily dependent upon the <i>Account Holder</i> for maintenance and support. <i>Dependent Children</i> also means children beyond the age of twenty-two (22) and unmarried, who are permanently, mentally and physically challenged and incapable of self-support. Also included in the definition of <i>Dependent Children</i> are the <i>Account Holder’s</i> <i>Dependent Children</i> under the age of twenty-six (26) and unmarried, who are classified as full-time students at an institution of higher learning. <i>INSURED PERSON</i> means the <i>Account Holder</i>, as Well as the <i>Account Holder’s</i> <i>Spouse</i> and <i>Dependent Children</i> whose name is on a <i>Common Carrier Ticket</i>. <i>PRIMARY CARDHOLDER</i> means a person who applied for a TD Credit Card, whose name is on the <i>Account</i> and to whom a TD Credit Card has been issued. <i>SPOUSE</i> means either a person to whom the <i>Account Holder</i> is lawfully married, or the common-law <i>Spouse</i> of an <i>Account Holder</i>. Common-law <i>Spouse</i> shall mean a person (of the same or opposite sex) who has been living with the <i>Account Holder</i> continuously for at least one year and is publicly represented as the <i>Account Holder’s</i> partner. <i>WE, US</i> and <i>OUR</i> mean TD Home and Auto Insurance Company and/or <i>Our Administrator</i></p>	<p>Section 4 – Definitions</p> <p>In this <i>Certificate</i>, the following words and phrases shown in italics and capitalized have the meanings shown below. As <i>You</i> read through the <i>Certificate</i>, <i>You</i> may need to refer to this Section to ensure <i>You</i> have a full understanding of <i>Your</i> coverage, limitations and exclusions.</p> <p>Account means the <i>Primary Cardholder’s</i> TD Credit Card Account that the <i>Bank</i> maintains.</p> <p>Account Holder means the <i>Primary Cardholder</i> to whom the monthly <i>Account</i> statement is issued, and who is a resident of Canada and any <i>Additional Cardholder</i> who is a resident of Canada. The <i>Account Holder</i> may be referred to herein using “<i>You</i>” and “<i>Your</i>”.</p> <p>Additional Cardholder means a person to whom a TD Credit Card has been issued at the authorization of the <i>Primary Cardholder</i>.</p> <p>Aeroplan Points mean the points awarded through the Aeroplan program which can be redeemed for rewards. <i>Aeroplan Points</i> have no monetary value</p> <p>Bank means The Toronto-Dominion Bank.</p> <p>Certificate means this Certificate of Insurance.</p> <p>Common Carrier means any licensed land, water or air conveyance operated by those whose occupation or business is transportation of persons or things without discrimination for hire. <i>Common Carrier</i> is extended to include any Airline having a Charter Air Carrier’s Licence or its equivalent, provided it maintains regularly scheduled flights and publishes timetables and fares consistent with scheduled airline practices and provided the aircraft is limited to fixed-wing turbo-prop or jet aircraft. Rafts, amusement park rides, jet skis, balloons, ski lifts and hang-gliders are not considered to be a <i>Common Carrier</i>.</p> <p>Covered Trip means travel on a <i>Common Carrier</i>, the fare for which at least 75% has been charged to <i>Your Account</i> and/or using <i>Your</i> <i>Aeroplan Points</i>.</p> <p>Dependent Children mean <i>Your</i> natural, adopted, or stepchildren who are:</p> <ul style="list-style-type: none"> • unmarried; and • dependent on <i>You</i> for financial maintenance and support; and • under 22 years of age; or • under 26 years of age and attending an institution of higher learning, full time, in Canada; or • mentally or physically handicapped. <p>Note: A <i>Dependent Child</i> does not include a child born while the child’s mother is outside her province or territory of residence during the <i>Covered Trip</i>. The child will not be insured with respect to that trip.</p> <p>Good Standing means:</p> <ul style="list-style-type: none"> • the <i>Primary Cardholder</i> has applied for the <i>Account</i>; • the <i>Bank</i> has approved and opened the <i>Account</i>; • the <i>Primary Cardholder</i> has not advised the <i>Bank</i> to close the <i>Account</i>; and • the <i>Bank</i> has not suspended or revoked credit privileges or otherwise closed the <i>Account</i>. <p>Insured Person means the <i>Account Holder</i>, as well as the <i>Account Holder’s</i> <i>Spouse</i> and <i>Dependent Children</i> whose name is on a <i>Common Carrier</i> ticket.</p> <p>Primary Cardholder means a person who applied for a TD Credit Card, whose name is on the <i>Account</i> and to whom a TD Credit Card has been issued.</p> <p>Spouse means:</p>
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Changes to your Certificate of Insurance, as of March 24, 2022

Benefit	Before	After
		<ul style="list-style-type: none"> • the person who the <i>Account Holder</i> is legally married to; or • the person the <i>Account Holder</i> has lived with for at least 1 continuous year in the same household and publicly refers to as their partner. <p>We, Us and Our mean TD Home and Auto Insurance Company and/or <i>Our Administrator</i>.</p>
<p>Flight/Trip Delay Insurance</p>	<p>SECTION 2 – \$1,000 FLIGHT/TRIP DELAY COVERAGE In the event that a departure of a <i>Common Carrier</i> on a <i>Covered Trip</i> on which the <i>Insured Person</i> had arranged to travel is delayed for four (4) hours from the time specified in the itinerary supplied to the <i>Insured Person</i>, We will pay up to \$1,000 for reasonable expenses for meals and accommodation while delayed and reasonable additional ground transportation expenses. Benefits payable are subject to the following: 1) Delay of a <i>Common Carrier</i> is caused by inclement <i>Weather</i> which means any severe <i>Weather</i> condition that delays the scheduled arrival or departure of a <i>Common Carrier</i>; or 2) Delay caused by equipment failure of a <i>Common Carrier</i>, which means any sudden, unforeseen breakdown in the <i>Common Carrier’s</i> equipment that delays the scheduled arrival or departure of a <i>Common Carrier</i>; or 3) Delay due to an unforeseen strike or other job action by employees of a <i>Common Carrier</i>, which means any labor disagreement that delays the scheduled arrival or departure of a <i>Common Carrier</i>. This coverage for Flight/Trip Delay does not include any loss caused directly and/or indirectly due to: 1) An event which was made public or known to the <i>Insured Person</i> prior to the date the trip was booked; 2) Laws, regulations or orders issued or made by any government or Public Authority; 3) Strikes or labor disputes that existed or of which advanced warning had been given prior to the date the <i>Covered Trip</i> was booked; 4) Cancellation due to the withdrawal from service temporarily or permanently of any <i>Common Carrier</i> on the orders or recommendations of any Port Authority or the Aviation Agency of any similar body in any country; or 5) A bomb search or bomb threat. The Flight/Trip Delay benefit is excess over any other insurance or indemnity (including any reimbursements by the <i>Common Carrier</i>) available to the <i>Insured Person</i>.</p>	<p>Section 5 – Description of Insurance Coverage</p> <p>No change.</p>

Changes to your Certificate of Insurance, as of March 24, 2022

Benefit	Before	After
<p>Flight/Trip Delay Insurance</p>	<p>SECTION 3 – CLAIMS If <i>You</i> have incurred a claim covered under the Flight/Trip Delay Insurance Plan, <i>You must</i> give notice by contacting Allianz within forty-five (45) days from the date of the occurrence of the delay. To report <i>Your</i> claim, please call 1-866-374-1129 or (416) 977-4425. In the event of a claim covered under the Flight/Trip Delay Insurance Plan, a loss report will be mailed to the Insured Person. <i>You</i> should complete it in full and return it within ninety (90) days from the date of occurrence of the delay. The loss report shall include but may not be limited to: • a copy of the <i>Common Carrier Ticket</i>, • a copy of the <i>Account</i> charge receipt or TD Credit Card statement for the cost of the <i>Common Carrier</i> and/or proof of redemption; • itemized receipts for actual expenses incurred for <i>Essential Items</i> and other expenses incurred as a result of <i>Your</i> Flight/Trip Delay; • written statement from the <i>Common Carrier</i> confirming the date and time of the <i>Common Carrier</i> delay; • reason or circumstances surrounding the delay; and • any other information reasonably required by Allianz.</p>	<p>Section 7 – How to Submit a Claim If <i>You</i> have incurred a claim covered under the Flight/Trip Delay Insurance <i>Certificate</i>, <i>You</i> must give notice by contacting <i>Our Administrator</i> within 45 days from the date of the delay. IMPORTANT NOTE: <i>You</i> must provide completed claim form with required supporting documentation, including the Loss Report, to <i>Our Administrator</i> as soon as possible, but no later than 90 days from the date of occurrence of the delay. The Loss Report shall include but may not be limited to: • a copy of the <i>Common Carrier</i> ticket; • a copy of the <i>Account</i> charge receipt or TD Credit Card statement for the cost of the <i>Common Carrier</i> and/or proof of redemption; • itemized receipts for actual expenses incurred for essential items and other expenses incurred as a result of <i>Your</i> Flight/Trip Delay; • a written statement from the <i>Common Carrier</i> confirming the date and time of the <i>Common Carrier</i> delay; • the reason or circumstances surrounding the delay; and • any other information reasonably required by <i>Our Administrator</i>. Who to Contact to Submit a Claim: A claim should always be reported within 45 days. <i>You</i> can get help 24 hours a day, 7 days a week by calling <i>Our Administrator</i> at 1-866-374-1129 (toll-free) from Canada or the U.S., or +1-416-977-4425 (collect) from other countries. Complete the Required Form a) Request the Form: To request a claim form, call <i>Our Administrator</i> at 1-866-374-1129 (toll-free) or +1-416-977-4425 (collect) from 8 a.m. to 8 p.m. ET, Monday to Friday. b) Time limit from date of event: If <i>You</i> are making a claim, <i>You</i> must send <i>Our Administrator</i> the appropriate claim forms, together with written proof of loss (e.g., original invoices and tickets) as soon as possible. In every case, <i>You</i> must submit <i>Your</i> completed claim form with required documentation within 90 days from the date of the accident or the date the claim arises. Failure to provide the applicable documentation may invalidate <i>Your</i> claim. What Claimant Can Expect from Insurer Once <i>We</i> have approved the claim, <i>We</i> will notify <i>You</i> and payment will be made within 60 days after receipt of the required claim forms, documentation and written proof of loss. If the claim has been denied, <i>We</i> will inform <i>You</i> of the claim denial reasons within 60 days after receipt of the required claim forms and written proof of loss.</p>

Changes to your Certificate of Insurance, as of March 24, 2022

Benefit	Before	After
Flight/Trip Delay Insurance	<p>SECTION 4 – INDIVIDUAL TERMINATION OF INSURANCE The insurance coverage of any <i>Insured Person</i> shall terminate on the earliest of the following: a) the date the Policy is terminated b) the expiration of the Policy term for which premium has been paid c) the date the <i>Account Holder's Account</i> is cancelled or his or her <i>Account</i> privileges are terminated.</p>	<p>Section 6 – When Your Coverage Terminates <i>Your Coverage Terminates</i> when: Coverage for the <i>Primary Cardholder</i> under this <i>Certificate</i> will terminate on the earliest of the following dates:</p> <ul style="list-style-type: none"> • the date the <i>Account</i> is cancelled, closed or otherwise ceases to be in <i>Good Standing</i>; • the date <i>You</i> cease to be eligible for coverage; and • the date the Group Policy terminates. <p>Coverage for an <i>Insured Person</i> other than the <i>Primary Cardholder</i> under this <i>Certificate</i> will terminate on the earliest of the following dates:</p> <ul style="list-style-type: none"> • the date coverage terminates for the <i>Primary Cardholder</i>; and • the date the <i>Insured Person</i> ceases to be eligible for coverage. <p>No benefits will be paid under this <i>Certificate</i> for losses incurred after coverage has terminated.</p>

Changes to your Certificate of Insurance, as of March 24, 2022

Benefit	Before	After
Flight/Trip Delay Insurance	<p>SECTION 5 – GENERAL CONDITIONS LEGAL ACTION LMITATION PERIOD. Every action or proceeding against the insurer for the recovery of insurance money payable under the contract is absolutely barred unless commenced within the time set out in the Insurance Act (for actions or proceedings governed by the laws of Alberta or British Columbia), The Insurance Act (for actions or proceedings governed by the laws of Manitoba), the Limitations Act, 2002 (for actions or proceedings governed by the laws of Ontario), the Civil Code of Quebec (for actions or proceedings governed by the laws of Quebec), or other applicable legislation. CONFORMANCE WITH STATUTES: Any terms of this Policy which are in conflict with the applicable statutes, laws or regulations of the province or territory in which this Policy is issued are amended to conform to such statutes. MASTER POLICY: This <i>Certificate</i> is a description of coverage provided by Policy #TGV010 issued to The Toronto-Dominion <i>Bank</i>. All terms and conditions of the Policy govern. In no event does possession of multiple <i>Certificates</i> or TD Credit Cards entitle an <i>Insured Person</i> to benefits in excess of those described herein</p>	<p>Section 8 – General Conditions False Claim If <i>You</i> or an <i>Insured Person</i> make a claim knowing it to be false or fraudulent in any respect, neither <i>You</i> nor the <i>Insured Person</i> will be entitled to the benefits of this coverage, nor to the payment of any claim under the Group Policy. Group Policy All benefits under this <i>Certificate</i> are subject in every respect to the Group Policy, which alone constitutes the agreement under which benefits will be provided. This Group Policy is issued to the Bank. The principal provisions of the Group Policy affecting <i>Insured Persons</i> are summarized in this <i>Certificate</i>. The Group Policy is on file at the office of the <i>Bank</i>. In no event does possession of multiple certificates or TD Credit Cards entitle an <i>Insured Person</i> to benefits in excess of those described herein. Legal Action Limitation Period Every action or proceeding against the Insurer for the recovery of insurance money payable under the contract is absolutely barred unless commenced within the time set out in the <i>Insurance Act</i> (for actions or proceedings governed by the laws of Alberta or British Columbia), <i>The Insurance Act</i> (for actions or proceedings governed by the laws of Manitoba), the <i>Limitations Act, 2002</i> (for actions or proceedings governed by the laws of Ontario), or other applicable legislation. For actions or proceedings governed by the laws of Quebec, the prescriptive period is set out in the <i>Civil Code of Quebec</i>. Other insurance All of <i>Our</i> coverages are excess insurance, meaning that any other sources of recovery <i>You</i> have will pay first, and this insurance policy will be the last to pay. The total benefits payable under all <i>Your</i> insurance, including this <i>Certificate</i>, cannot be more than the actual expenses for a claim. If an <i>Insured Person</i> is also insured under any other insurance certificate or policy, <i>We</i> will coordinate payment of benefits with the other insurer. Right of Subrogation There may be circumstances where another person or entity should have paid <i>You</i> for a loss but instead <i>We</i> paid <i>You</i> for the loss. If this occurs, <i>You</i> agree to co-operate with <i>Us</i> so <i>We</i> may demand payment from the person or entity who should have paid <i>You</i> for the loss. This may include: <ul style="list-style-type: none"> • transferring to <i>Us</i> the debt or obligation owing to <i>You</i> from the other person or entity; or • permitting <i>Us</i> to bring a lawsuit in <i>Your</i> name; or • if <i>You</i> receive funds from the other person or entity, <i>You</i> will hold it in trust for <i>Us</i>; or • acting so as not to prejudice any of <i>Our</i> rights to collect payment from the other person or entity. <i>We</i> will pay the costs for the actions <i>We</i> take.</p>