

*The Jim Cullum Jazz Band*

## **Beth Cox Associates**

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### **WHY YOU SHOULD PURCHASE TRAVEL PROTECTION: THE TEN-DAY ADVANTAGE**

#### **Pre-Existing Condition Waiver**

The Pre-Existing Condition Exclusion is waived provided You purchase Worldwide Trip protector within ten (10) days of Your initial Trip payment; protect the full non-refundable cost of Your Trip; are medically able to travel on the date You purchase Worldwide Trip Protector and have not filed a Trip Cancellation claim due to a Pre-Existing Condition within 180 days prior to the Effective Date of Your Protection Plan.

#### **Bankruptcy and Default**

If You purchase Worldwide Trip Protector within ten (10) days of Your initial Trip payment and for the full non-refundable cost\* of Your Trip, You will be eligible for benefits up to the benefit amount protected up to a maximum of \$20,000, due to Bankruptcy or Default of an airline, cruise line, or tour operator (other than the travel agent or Travel Supplier that solicited this Protection Plan and from whom you purchased your travel arrangements) which stops service more than fourteen (14) days following Your Protection Plan Effective Date.

Your scheduled Departure Date must be no more than fifteen (15) months beyond the Effective Date of Your Protection Plan. Benefits will be paid due to Bankruptcy or Default of an airline only if no alternate transportation is available. If alternate transportation is available, benefits will be limited to the change fee charged to allow You to transfer to another airline in order to get to Your intended destination. The Bankruptcy or Default benefit is excess and secondary to all other forms of indemnity.

#### **Terrorism**

If You purchase Worldwide Trip Protector within ten (10) days of Your initial Trip payment and for the full non-refundable cost of Your Trip, You will be eligible for benefits up to Your protected Trip cost if You cancel Your Trip due to a Terrorist Incident. The Terrorist Incident must occur in a city listed on Your itinerary within 30 days prior to Your Scheduled Departure Date. This same city must not have experienced a Terrorist Incident within the 90 days prior to the Terrorist Incident, which is causing Your cancellation. Benefits are not provided if Your Travel Supplier offers a substitute itinerary.

#### **DOUBLE ADVANTAGE**

You may cancel the Protection Plan by giving us written notice within either 20 days from the date of issuance of Your Protection Plan, or Your departure Date whichever occurs first. If You do this, we will refund Your Plan cost in full (excluding the administration fee.)

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#### **HOW TO PURCHASE:**

**CALL TRAVEL INSURED INTERNATIONAL: (800) 243-3174 and  
please mention code # 46596, to the Customer Service Representative**

**OR**

**COMPLETE THE APPLICATION ON THE OPPOSITE SIDE AND MAIL OR FAX TO  
TRAVEL INSURED**

**OR**

**Log on to [WWW.TRAVELINSURED.COM](http://WWW.TRAVELINSURED.COM)**

**Be sure to identify Agent Code 46596 when making your purchase**



**SCHEDULE OF BENEFITS**

**Comprehensive Protection Plan**

Protection begins when you purchase your plan and concludes when you have completed your trip.

<u>Benefits</u>	<u>Limits</u>
Trip Cancellation .....	Up to trip cost
Trip Interruption .....	150% Trip Cancellation Limit
Travel Delay (\$150/day) .....	\$500 after 6 hours
Missed Connection .....	\$300
Loss of Baggage/Personal Effects .....	\$1,000
Baggage Delay .....	\$200 after 24-hrs.
Emergency Medical/Dental .....	\$50,000
Medical Evacuation/Repatriation .....	\$250,000
24-hr Accidental Death and Dismemberment .....	\$10,000
24-hr Assistance .....	Included

**Comprehensive Protection Plan Rates**

Tour Cost Band	age of traveler				
	0 - 40	41 - 60	61 - 70	71 - 80	81+
\$0 - \$500	\$27	\$32	\$49	\$70	\$115
\$501 - \$1000	\$37	\$46	\$69	\$98	\$161
\$1,001 - \$1,500	\$49	\$58	\$89	\$126	\$213
\$1,501 - \$2,000	\$62	\$78	\$119	\$159	\$270
\$2,001 - \$2,500	\$85	\$99	\$149	\$226	\$400
\$2,501 - \$3,000	\$105	\$119	\$179	\$273	\$518
\$3,001 - \$3,500	\$119	\$139	\$219	\$320	\$600
\$3,501 - \$4,000	\$132	\$155	\$244	\$373	\$697
\$4,001 - \$4,500	\$144	\$172	\$285	\$429	\$788
\$4,501 - \$5,000	\$159	\$199	\$329	\$482	\$880
\$5,001 - \$5,500	\$199	\$231	\$419	\$565	\$1,017
\$5,501 - \$6,000	\$221	\$255	\$469	\$619	\$1,114
\$6,001 - \$6,500	\$243	\$280	\$509	\$672	\$1,210
\$6,501 - \$7,000	\$258	\$299	\$559	\$736	\$1,323
\$7,001 - \$8,000	\$288	\$333	\$599	\$808	\$1,495
\$8,001 - \$9,000	\$329	\$380	\$689	\$911	\$1,687
\$9,001 - \$10,000	\$373	\$430	\$779	\$1,019	\$1,887

**Post Departure Protection Plan**

Protection begins when your trip begins and concludes when you have completed your trip.

Trip Interruption (Return Air Only) .....	\$1,000
Travel Delay (\$150/day) .....	\$500 after 6 hours
Missed Connection .....	\$300
Loss of Baggage/Personal Effects .....	\$1,000
Baggage Delay .....	\$200 after 24-hrs.
Emergency Medical/Dental .....	\$50,000
Medical Evacuation/Repatriation .....	\$250,000
24-hr Accidental Death and Dismemberment .....	\$10,000
24-hr Assistance .....	Included

**Post Departure Protection Plan Rates**

Trip Length	age of traveler				
	0 - 40	41 - 60	61 - 70	71 - 80	81+
1 - 4 days	\$8	\$10	\$18	\$22	\$39
5 - 8 days	\$17	\$21	\$35	\$43	\$75
9 - 15 days	\$28	\$35	\$58	\$74	\$125
16 - 23 days	\$44	\$54	\$89	\$116	\$192
24 - 30 days	\$66	\$79	\$131	\$187	\$276

**Optional Flight Accident Plan**

\$100,000 Benefit ..... \$8 per person  
 \$250,000 Benefit ..... \$18 per person

**APPLICATION**

YOU MUST BE A U.S. RESIDENT OR U.S. CITIZEN TO PURCHASE

Choose the plan you wish to purchase for all travelers (circle one):  
 Comprehensive Plan or Post Departure Plan  
**Agency Account: Beth Cox Associates # 46596**

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Phone Number: \_\_\_\_\_  
 Departure Date: \_\_\_\_\_ Return Date: \_\_\_\_\_  
 Destination: \_\_\_\_\_ Initial Trip Deposit Date: \_\_\_\_\_  
 Date of Birth: \_\_\_\_\_ Beneficiary: \_\_\_\_\_  
 Camp Name: \_\_\_\_\_

**Family Member Traveling With You**

Name	Date of Birth
Purchaser: _____	____/____/____
#2 _____	____/____/____
#3 _____	____/____/____

**Calculating Pricing**

Fill in Trip Cost or Length of Trip      Select & Fill in Plan Rate  
 Purchaser: \_\_\_\_\_  
 #2 \_\_\_\_\_  
 #3 \_\_\_\_\_  
 Calculate additional cost for trips over 30 days;  
 # of days \_\_\_\_\_ x # of Travelers \_\_\_\_\_ x \$3.00 = \_\_\_\_\_  
 Non-refundable Administration Fee (Per Application): \$6.00  
 SUBTOTAL THIS SECTION: \_\_\_\_\_

**Optional Flight Accident**

The purchase of the Optional Flight Accident Plan must apply to all travelers and may not be purchased separately.

Circle One:

\$100,000 - \$8 per person      \$250,000 - \$18 per person  
 Plan Rate \_\_\_\_\_ x # of Travelers \_\_\_\_\_ = \_\_\_\_\_  
 SUBTOTAL THIS SECTION: \_\_\_\_\_

TOTAL(Including \$6.00 administration fee): \_\_\_\_\_

**Payment**

Check or Money Order (Payable to Travel Insured Intl.)  
 Visa     MasterCard     American Express

Name on Credit Card: \_\_\_\_\_  
 Credit Card Number: \_\_\_\_\_ Exp. Date: \_\_\_\_\_  
 Signature: \_\_\_\_\_

For a complete description of benefits, conditions, and exclusions please contact Travel Insured International:  
 52-S Oakland Avenue, East Hartford, CT 06128  
 Phone: (800) 243-3174 Fax: (860) 528-8005  
 www.travelinsured.com