

Insure your trip — and protect your peace of mind.

FIND OUT MORE

<https://alumni.tpaproducts.com/ugaaa>

To learn more about Alumni Travel Protection, call Alumni Travel Services customer care toll-free at **1-866-753-1002**, Monday–Friday, 8:30 am–5:00 pm Eastern time.

WE'RE BY YOUR SIDE WHEN THE UNEXPECTED HAPPENS

You plan your trips carefully. But sometimes things happen that are simply out of your control — like injury, illness, trip delays and lost baggage. These unexpected problems can cost you more than just your vacation. They can also lead to significant costs, worry and hassles.

That's why the University of Georgia® Alumni Association recommends the Alumni Travel Protection Plan. It insures your trip and gives you peace of mind when you travel.

DESIGNED FOR UNIVERSITY OF GEORGIA® ALUMNI

The Alumni Travel Protection Plan is custom-designed exclusively for University of Georgia® alumni. You choose the tier of coverage — either Standard, Preferred or Ultimate — that best fits your needs and budget.

BENEFITS & SERVICES	STANDARD	PREFERRED	ULTIMATE
TRIP CANCELLATION	Max \$10,000	Max \$35,000	Max \$50,000
TRIP INTERRUPTION	100% of trip cost	150% of trip cost	200% of trip cost
TRIP DELAY	\$150/day, max \$750	\$200/day, max \$1,000	\$250/day, max \$1,500
MISSED CONNECTION	Not covered	Not covered	\$1,500
EMERGENCY MEDICAL EVACUATION	\$50,000	\$500,000	\$1,000,000
REPATRIATION OF REMAINS	\$50,000	\$500,000	\$1,000,000
EMERGENCY ACCIDENT & SICKNESS MEDICAL EXPENSE	\$25,000	\$50,000	\$100,000
24-HOUR AD&D	\$10,000	\$25,000	\$50,000
COMMON CARRIER AD&D	Not covered	\$10,000	\$25,000
BAGGAGE DELAY	\$100/day, max \$100	\$150/day, max \$500	\$200/day, max \$750
BAGGAGE, PERSONAL EFFECTS & SPORTING EQUIPMENT LOSS	\$500	\$1,000	\$2,000
PROPERTY DAMAGE	\$500	\$1,000	\$2,000
COLLISION DAMAGE WAIVER	Not covered	Not covered	\$35,000
CANCEL FOR ANY REASON (CFAR)	Not covered	Not covered	Optional upgrade
SECURITY/POLITICAL EVACUATION	Not covered	\$50,000	\$100,000

SECURITY EVACUATION COVERAGE! These days, security and personal safety is a big concern when traveling to many areas of the world. You may travel more confidently with the added benefit of Security and Political Evacuation coverage under the Preferred and Ultimate plans.

ADDITIONAL TRAVEL PROTECTION BENEFITS/FEATURES

TRIP CANCELLATION & TRIP INTERRUPTION

Provides coverage for certain pre-paid nonrefundable expenses due to:

- Sickness, injury or death of you, a family member or traveling companion
- Weather that causes complete cessation of services for your airline
- Bankruptcy and/or default of your travel supplier or airline
- Your home being made uninhabitable due to fire, flood, earthquake, hurricane or other natural disaster
- Being hijacked, quarantined or required to serve on a jury
- A terrorist incident that occurs in your departure city or in a city that is a scheduled destination for your trip
- Directly involved in a traffic accident while en route to departure
- Natural disaster that renders your destination accommodations uninhabitable
- You become laid off or terminated from your place of employment
- You are called to emergency military duty due to a natural disaster
- Death or hospitalization of your host at destination

TRIP DELAYS

Provides coverage for reasonable accommodation and traveling expenses if you are delayed en route to or from your trip or for more than 12 hours due to:

- Traffic accident while en route to departure
- Common carrier delays
- Unannounced strike
- Natural disaster
- Lost or stolen passports, money or travel documents
- Closed roadways

BAGGAGE/PERSONAL EFFECTS & DELAY

- Provides coverage for baggage or other personal effects that are lost, damaged or stolen while on your trip.
- Provides coverage for the emergency purchase of essential items if your baggage is delayed for more than 12 hours during your trip.

ACCIDENTAL DEATH & DISMEMBERMENT

Provides coverage for loss of limb or life in the event of an accident while traveling, or within 180 days after the incident due to the direct result of the accident.

EMERGENCY EVACUATION (Emergency Medical Transportation)

If you become sick or injured on your trip, On Call International will:

- Arrange for and transport you from the hospital where you are first taken to the nearest hospital where appropriate medical treatment can be obtained.
- Provide you with assistance to return home, if medically necessary.
- Provide transportation for your dependent children traveling with you should you remain hospitalized for more than 7 days.
- Arrange for the repatriation of your mortal remains.

EMERGENCY MEDICAL OR DENTAL EXPENSE

Provides coverage for emergency medical expenses due to an accidental injury or sickness during your trip. This includes emergency dental treatment due to an accidental injury.

THIS ALUMNI PROTECTION PLAN IS UNDERWRITTEN BY:

Nationwide Mutual Insurance Company.

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IMPORTANT NOTES

1. **Early Purchase Requirements:** To be eligible for the Pre-Existing Medical Condition Exclusion Waiver and Terrorist Incident coverage, this Enrollment Form and payment must be received (if mailed, postmarked) within 14 days (Standard Option), 21 days (Preferred Option) or 30 days (Ultimate Option) from the date of your trip's initial deposit/payment. To be eligible for the Cancel For Any Reason benefit in the Ultimate Option, this Enrollment Form and your payment must be received (if mailed, postmarked) within 30 days from the date of your trip's initial deposit/payment. You must purchase coverage for the full cost of the covered trip to receive Early Purchase Benefits.
2. For complete terms and conditions, review your state Certificate of Insurance/Policy at <https://alumni.tpaproducts.com/ugaaa>.
3. If for any reason you wish to cancel your Alumni Travel Protection plan in the first 10 days of purchase and you have not incurred a claim, a full refund, less \$5 nonrefundable processing fee, will be returned.

ALUMNI TRAVEL PROTECTION ENROLLMENT FORM

OR ENROLL ONLINE AT

<https://alumni.tpaproducts.com/ugaaa>

Don't wait to protect your next trip. Complete the Enrollment Form and send to:

Alumni Travel Protection Plan Administrator
PO BOX 26222 • Tampa, FL 33623
Email: Team1@cbpinsure.com
Phone: 1-866-753-1002

PARTICIPANTS

Name: First, Last (Please Print)

Date of Birth (MM/DD/YY)

1	<input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
2	<input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
3	<input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
4	<input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>

Choose One Option (for all participants): Standard Preferred Ultimate

TRIP INFORMATION

Organization Sponsoring Trip (Ex: Alumni Assoc., Tour Operator/Agency, etc.)

Initial Trip Payment/Deposit Date*

 / /

*Required to qualify for Early Purchase Benefits

Departure Date (MM/DD/YY)

 / /

Return Date (MM/DD/YY)

 / /

Indicate types of travel arrangements you are insuring.

Air Land Cruise Rail

Primary Travel Destination

ADDRESS & CONFIRMATION DELIVERY

Name

Address

City

State

ZIP

Phone

Email Address

Any person who knowingly and with intent to defraud any insurance company is subject to criminal and civil penalties. I represent that the above information is true and the dates reflect my intent to start and end my trip. I understand that **Early Purchase Requirements** may apply to certain benefits (See Important Notes #1). I have read, and understand and agree to the terms and conditions of the plan, as detailed in the Certificate of Insurance (See Important Notes #2).

Signature

Date

C PAYMENT CALCULATION PER PARTICIPANT

	Trip Cost	Rate (See Chart Below)	Plan Cost
1	<input type="text"/>	X <input type="text"/>	= <input type="text"/>
2	<input type="text"/>	X <input type="text"/>	= <input type="text"/>
3	<input type="text"/>	X <input type="text"/>	= <input type="text"/>
4	<input type="text"/>	X <input type="text"/>	= <input type="text"/>

To add optional Cancel For Any Reason coverage to your Ultimate Plan: (Must be purchased for all participants on this Enrollment Form).....\$1.40 X

Subtotal:

Total Insured Trip Cost (include all)

Nonrefundable Processing Fee: +

\$5.00

Total Payment Due:

Plan Cost Rates Chart (Circle Plan Choice)

BASIC PLAN						
AGE BAND	0-35	36-40	41-45	46-50	51-55	56-60
GROSS PROGRAM FEE OF TRIP COST	4.50%	5.75%	6.25%	6.75%	7.25%	7.50%
AGE BAND	61-65	66-70	71-75	76-80	81-85	86+
GROSS PROGRAM FEE OF TRIP COST	9.00%	9.75%	12.00%	13.50%	N/A	N/A

PREFERRED PLAN						
AGE BAND	0-35	36-40	41-45	46-50	51-55	56-60
GROSS PROGRAM FEE OF TRIP COST	5.00%	6.50%	7.00%	7.50%	8.00%	8.50%
AGE BAND	61-65	66-70	71-75	76-80	81-85	86+
GROSS PROGRAM FEE OF TRIP COST	10.00%	11.00%	13.50%	15.00%	19.00%	21.00%

ULTIMATE PLAN						
AGE BAND	0-35	36-40	41-45	46-50	51-55	56-60
GROSS PROGRAM FEE OF TRIP COST	5.75%	7.50%	8.25%	8.75%	9.25%	10.00%
AGE BAND	61-65	66-70	71-75	76-80	81-85	86+
GROSS PROGRAM FEE OF TRIP COST	11.50%	12.75%	15.50%	17.25%	22.00%	24.00%

- Multiply Rate with each Participant's Trip Cost •
- Use each Participant's Age as of Enrollment Postmark Date •

PAYMENT TYPE

- Check (Payable to Nationwide) Visa
 MasterCard UGA®/Visa: UGA® Benefits when you charge your UGA® Card Card #

Expiration Date

Card Security Code

Billing ZIP Code

I authorize Nationwide Travel Plans to charge my credit card for the premium indicated.

Signature of Cardholder