

# International Helpers (Guernsey) Trust



Charitable  
Travel

## Medical Professional Liability Program

“The International Helpers (Guernsey) Trust (IHT) provides a range of benefits to Trust Participants while traveling outside of the USA for charitable purposes on short-term trips. These benefits are provided by service contracts and policies issued to the IHT which form the Trust Fund that is held for the benefit of the Trust Participants.”

BENEFIT	LIMIT	COMMENTS
<b>Medical Professional Liability</b>	\$500,000	\$5,000 retention per claim, per practitioner. Applies to occurrences outside of home country and outside the U.S. See page 7 for details.
<b>Accidental Death &amp; Dismemberment</b>	\$100,000	Reduced to \$10,000 for those under age 12 or over age 70
<b>Medical Expenses – Primary</b> <i>No preexisting conditions exclusion</i>	\$10,000	<b>Primary benefits;</b> \$2,500 of this limit is available to pay U.S. or Canadian providers. With COVID-19 diagnosis, benefits are secondary to your primary medical plan. (\$100 deductible)
<b>Disability Income Benefit</b>	\$1,000/month \$500/month \$250/month	First 100 Months — Accident Months 101–200 — Accident 50 Months — Sickness (after 3 month waiting period) <i>(no benefit if under age 12 or over age 70)</i>
<b>Assistance Service</b>	Included	Available 24/7/365 for assistance with worldwide medical emergencies; provided by IMG Global Response
<b>Emergency Medical Evacuation</b>	\$100,000	Coordinated by IMG Global Response; will bring participant back to their home country (including US) if necessary
<b>Crisis Management Service*</b>	Included	Available 24/7/365 for assistance with worldwide non-medical emergencies; provided by World Aware - includes threat of COVID-19 with a limit of \$1,000.
<b>Security Evacuation*</b>	\$100,000	Coordinated by World Aware; for evacuation due to crime, civil unrest, natural disasters, kidnap/hostage
<b>Family Coordination and Repatriation of Mortal Remains</b>	\$25,000	Combined limit for both benefits and includes a sublimit of <b>\$2,500 for extra expenses</b> incurred during an approved evacuation
<b>Personal Property</b>	\$2,500	“Door to door” replacement cost benefit includes checked baggage; higher limits available upon request (\$100 deductible)
<b>General Liability</b>	\$1,000,000	Worldwide jurisdiction; includes benefit for injury to a volunteer; covers volunteer and sending organization
<b>Crisis Triage</b>	Included	Available 24/7/365 for guidance and support through difficult situations; provided by Concilium
<b>Telemedicine</b>	Included	Provides fast and convenient care for your medical needs with no consultation fee or copay; available 24/7/365
<b>PARTICIPATION FEE</b>	<b>Varies Per Class Selection</b>	

## Benefit Selection

### Short-Term Volunteer Groups & Individuals

If eligible for participation in the Trust, benefits will be provided during **short-term projects outside the United States**. Individual physicians, surgeons, nurses and various medical technicians or groups of these persons affiliated with nonprofit, without organization benefits.

Daily Participation Fee Per Practitioner Without Organization Benefits	
Classification 1	\$9.37
Classification 2	\$12.99
Classification 3	\$16.63

Daily Participation Fee Per Practitioner Includes Organization Benefits	
Classification 1	\$10.82
Classification 2	\$15.28
Classification 3	\$19.81

includes organization benefits.

## Classifications

- 1) **Physician – No Surgery:** Chiropractor, Dentist, Registered Nurse, Nurse Practitioner, Pharmacist, Physician Assistant, physical therapy, Various Medical technicians – X-ray, CT, surgical, EMT, etc.
- 2) **Physician – Minor Surgery:** Podiatry, Emergency Medicine, Oral Surgeon, Nurse Anesthetist, Radiation Therapist.
- 3) **Specialists Providing Surgical Procedures, Highly Skilled Search and Rescue, Physician – Major Surgery:** Ophthalmology, Urology, Cardiac Surgery, Otolaryngology, General Surgery, Anesthesiology, Obstetrics-Gynecology, Plastic Surgery, Thoracic Surgery, Vascular Surgery, Orthopedic Surgery, Neurosurgery, and all others.

## Practitioner

**Without Organization Benefits:** Choosing this option provides liability protection for you as a practitioner but no benefits will extend to your sponsoring organization.

**Includes Organization Benefits:** Choosing this option will not only provide liability protection for you as a practitioner, but also for your sponsoring organization as a result of your actions. Please note that the \$500,000 limit is shared among all claimants for a single occurrence pertaining to an enrollee. This option does not provide an additional \$500,000 limit to your sponsoring organization.

ALTHOUGH GALLAGHER CHARITABLE IS WILLING TO ASSIST YOU IN UNDERSTANDING THIS PROGRAM, WE ARE NOT SOLICITING YOUR PARTICIPATION IN THE INTERNATIONAL HELPERS TRUST. THIS TRUST IS LOCATED IN GUERNSEY. IT IS NOT AUTHORIZED TO SOLICIT BUSINESS IN THE UNITED STATES AND IS NOT SUBJECT TO REGULATION WITHIN THE UNITED STATES. THE BENEFITS PROVIDED BY THE TRUST ARE ONLY APPLICABLE WHILE YOU ARE OUTSIDE THE TERRITORIAL BOUNDARIES OF THE UNITED STATES. TO PARTICIPATE IN THIS TRUST, IT IS NECESSARY FOR YOU TO CONTACT THE TRUST.

## COVID-19 Benefits

1. Medical: \$10,000 is available for other illnesses on a primary basis with no preexisting condition exclusion. With a positive COVID-19 diagnosis, this medical benefit operates in a secondary manner to a U.S.-based medical plan.
2. Emergency Medical Evacuation: Effective 8/11/2020—IMG Global Response™ is the assistance service provider and they will work closely with a doctor on the ground for emergencies which may be life-threatening. Keep in mind that it may not be possible to be evacuated and you should consider the level of care provided at your destination prior to travel.

\*Covid vaccination is no longer required to receive this benefit

3. Crisis Benefits: Effective 11/5/2020—Threat of COVID-19—Typically used for mandatory quarantine prior to return travel. May extend to other circumstances.
  - a. Change in Air Travel: This benefit is available if there is no financial relief provided by the airline for an itinerary change up to \$1,000 per person.
  - b. Hotel Changes: The benefit is available if there is no other credit or financial relief provided by the hotel up to \$500 per person.

## Optional Medical Benefits – can be purchased in addition

**No optional medical benefits are available for participants under age 12 or 70 and above; however, there is no age restriction on purchase of the Expert Traveler Package base plan.**

AGE	LIMIT	OPTIONAL BENEFIT	RATES***
12-59	\$40,000	<b>Excess Medical Expenses – Optional</b>	Additional \$0.49 per diem
	\$90,000	Preexisting conditions are excluded. Includes an additional \$50,000 Emergency Medical Evacuation limit.	Additional \$0.69 per diem
60-65	\$40,000	<b>Excess Medical Expenses – Optional</b> Preexisting conditions are Excluded. Does NOT include an additional Emergency Medical Evacuation limit.	Additional \$1.40 per diem
66-69	\$40,000	<b>Excess Medical Expenses – Optional</b> Preexisting conditions are Excluded. Does NOT include an additional Emergency Medical Evacuation limit.	Additional \$3.05 per diem

## Optional Medical Benefits Exclusions:

- a) coronavirus disease (COVID-19);
- b) severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2); and
- c) any mutation or variation of SARS-CoV-2.

Regardless of any provision to the contrary, the policy excludes any liability directly or indirectly caused by or resulting from, arising out of or in connection with or attributable to:

- a) any coronavirus (or similar or equivalent virus in the future), including any mutation or variation of a coronavirus;
- b) any coronavirus disease (or similar or equivalent disease in the future);
- c) any epidemic or pandemic which poses a threat to human health or human welfare whether officially declared an epidemic or pandemic or not; or
- d) any fear or threat of a), b) or c) above.

Optional excess medical expenses are available for purchase at a daily rate in addition to the \$4.00 participation fee. No excess benefits are available to participants under age 12 or 70 and above. All participants do receive \$10,000 in primary medical expenses with their base participation fee regardless of age.

## Excess Short-Term Property

Personal property up to \$2,500 is provided under the personal property component of this plan. Additional benefits are available for equipment accompanying you on your short-term trip. These benefits must be coupled with the purchase of this plan and must accompany an international short-term missions trip enrollment. It protects against risks of physical loss or carnage. Benefits are provided on a replacement cost basis subject to deductible and includes the following perils: fire, theft, windstorm, flood, earthquake, and war. Common exclusions include, but are not limited to, wear and tear, mechanical breakdown, routine maintenance and recalibration. Benefits are limited to losses occurring overseas and accompanying you to or from overseas. Equipment shipped separately is not included in this plan. Please contact our office if such benefits are desired.



### Mail or Email to:

P.O. Box 2860

Greenville, SC 29602

P: 800.922.8438 | F: 864.239.2435

[gallaghercharitable@ajg.com](mailto:gallaghercharitable@ajg.com)

[www.TravelWithGallagher.com](http://www.TravelWithGallagher.com)

By requesting that we enroll you or your group, you are agreeing to participate in the International Helpers (Guernsey) Trust (IHT) for certain benefits and services. The Trust Participation Agreement is attached for signature and return with enrollment. Services and benefits are provided by service contracts and insurance policies issued to IHT.

# Medical Professional Liability Program Enrollment Form

Please Print

## Contact Information

Name:

Signature:

Date:

Address:

City:

State:

Zip:

Phone:

Email:

Sponsoring Organization or Other Group:

## Trip Information

Destination City:

Destination Country:

Expected Date of Departure from Home:

Expected Date of Arrival Back Home:

Total number of Days (Include date of departure and return when calculating):

Please note this is not a major medical policy. Major Medical Coverage is available for individuals and groups on short-term and long-term volunteer missionary assignments. If this is a need specific to your group, please contact us for details.

I certify that this is a missions trip, not-for-profit, or humanitarian relief travel.

I certify that I am in good standing with my appropriate licensing authority. I have current Professional Liability in effect, unless retired box below is ticked.

OR

I am retired and Professional Liability coverage was in place at the time of retirement OR I am a student and do not yet have Professional Liability in effect.

If this is not the case then NO cover is provided for you. If benefits are desired, then full details MUST BE submitted for Underwriting and Approval.

I certify that all the information provided above and by attachment is correct.

I understand all limitations and exclusions as spelled out in this brochure

**ALL TRAVELERS must complete the Travelers Information table on the following page.**

### Mail or email application to:

Gallagher Charitable International Insurance  
Services P.O. Box 2860 – Greenville, SC 29602

Phone: 800.922.8438 | Fax: 864.239.2435

Email: [Gallagher\\_Charitable\\_MPL@ajg.com](mailto:Gallagher_Charitable_MPL@ajg.com)

Web: [www.TravelwithGallagher.com](http://www.TravelwithGallagher.com)

**Note:** By requesting that we enroll you or your group, you are agreeing to participate in the International Helpers (Guernsey) Trust for certain benefits and services. The Trust Participation Agreement is attached for signature and return with enrollment.

# Travelers Information

**Participants Traveling** – If additional space is needed, please attach your list of team members and travel dates.

	Class 1, 2 or 3	Organization Coverage	First Name (Required)	Last Name (Required)	Date of Birth (Required)	Passport Number (Required)	Beneficiary (or Estate of Insured)	Medical License Number (Required)	Country and State of License (Required)	Optional Benefits			
										Excess Medical \$40,000 (Age 12-59)	Excess Medical \$90,000 (Age 12-59)	Excess Medical \$40,000 (Age 60-65)	Excess Medical \$40,000 (Age 66-70)
1.		<input type="checkbox"/>								<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.		<input type="checkbox"/>								<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.		<input type="checkbox"/>								<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.		<input type="checkbox"/>								<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5.		<input type="checkbox"/>								<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.		<input type="checkbox"/>								<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7.		<input type="checkbox"/>								<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8.		<input type="checkbox"/>								<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9.		<input type="checkbox"/>								<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10.		<input type="checkbox"/>								<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11.		<input type="checkbox"/>								<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12.		<input type="checkbox"/>								<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13.		<input type="checkbox"/>								<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14.		<input type="checkbox"/>								<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15.		<input type="checkbox"/>								<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Emergency Medical Evacuation is covered up to \$100,000 under the Standard Option. The optional coverages for Ages 12-59 provide an additional \$50,000 Emergency Medical Evacuation Limit.**

I verify that all participant licenses are in good standing with the appropriate licensing authority and have current medical malpractice in force (or, if retired, malpractice was in place at the time of retirement).

Note: If any practitioner license is not in good standing, full details MUST BE submitted for underwriting and approval.

Signature of Representative: \_\_\_\_\_

# International Helpers (Guernsey) Trust

## “Participation Agreement”

**THIS AGREEMENT** made and entered into as of the \_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_ by and between **ARTEX RISK SOLUTIONS (GUERNSEY) LIMITED** and \_\_\_\_\_ (Name of Participating Individual or Group).

### RECITALS

- (A) ARTEX RISK SOLUTIONS (GUERNSEY) LIMITED has been appointed and is acting as the trustee under a Declaration of Trust titled the International Helpers (Guernsey) Trust (the "Declaration of Trust") and made by Artex Risk Solutions (Guernsey) Limited of Heritage Hall, Le Marchant Street, St Peter Port, Guernsey (hereinafter with any other trustee or trustees serving under the Declaration of Trust referred to as the "Trustee"). The purpose of the Declaration of Trust is to afford the benefit of certain services, including travel benefits, to qualifying persons, members, customers or employees of certain organisations.
- (B) \_\_\_\_\_ Participating Individual or Group (hereinafter with any successor or successors thereto referred to as the "Participant") desires to afford to himself or qualifying beneficiaries benefits of the sort available under the Declaration of Trust Sub Funds B, D, E, F & G – War Risk, International Property, Personal Accident & General Liability and Crisis Management Services of the sort available under the Declaration of Trust.

**NOW THEREFORE** in consideration of the mutual promises herein contained the Trustee and the Participant hereby agree as follows:

- 1 Subject to the approval of International Helpers Trust providing the travel benefits for the Participant, and the Service Provider entering into the Service Offering pursuant to which certain other services shall be provided to the Participant the Trustee agrees to permit the Participant to become a Participant under the Declaration of Trust.
- 2 The Participant agrees to be bound by:
  - 2.1 the provisions of the Declaration of Trust; and
  - 2.2 each and every provision of the Declaration of the Trust and the Service Offering.
3. The definitions contained in the Declaration of Trust shall apply in the construction and interpretation of this Participation Agreement.
4. In particular, but without prejudice to the generality of the foregoing, the Participant agrees promptly to furnish to the Trustee, the Service Provider or, if requested by the Administrator under the Declaration of Trust to do so to the Administrator, all records and other information required by the Service Provider to administer properly the Declaration and/or the Service Offering and to permit the Trustee, the Service Provider and/or the Administrator, whenever and as often as the Trustee, the Service Provider or the Administrator may reasonably require, to inspect the records of the Participant bearing on the Trust and/or the Service Offering.
5. The Participant hereby appoints the Administrator (if any) acting under the Declaration of Trust to represent the Participant in all dealings with the Trustee having to do with the Trust Fund including by way of example and not of limitation of the foregoing such matters as instructions to the Trustee, the resignation or dismissal of the Trustee and the appointment of a successor, amendment of the Declaration of Trust, the fixing and adjustment of the Trustee's fee and all other matters pertaining to the construction of the Declaration of Trust, its effect and the administration of the Trust Fund.
6. In the event that the Participant shall withdraw as a Participant under the Declaration of Trust in accordance with the provisions thereof the Participant agrees that it shall relinquish any and all claims the Participant may have on the date on which such withdrawal becomes effective or which thereafter may accrue to any portion of the Trust Fund.
7. The Trustee shall make available at its principal place of business and during normal business hours upon reasonable notice to the Participant or any one or more of the qualifying persons, members, customers or employees of the Participant an executed duplicate of the Declaration of Trust and all amendments thereto which shall at the time be in force and effect.
8. The Participant shall pay when due the cost of all fees applicable to the Participant's qualifying persons, members, customers or employees to the Trustee or its nominee. Payment shall be at the risk of the Participant.
9. The Participant agrees and warrants that no solicitations have been made to it to enter into this Participation Agreement and that its participation under the terms of the Declaration of Trust, and Service Offering is voluntary.

“Accepted on behalf of all participants on this application:”

\_\_\_\_\_

Print Name

\_\_\_\_\_

Date

\_\_\_\_\_

Signature

## Short-Term Medical Professional Volunteer Benefits

*Although Gallagher is willing to assist you in understanding this program, we are not soliciting your participation in the International Helpers (Guernsey) Trust. This Trust is located in Guernsey. It is not authorized to solicit business in the United States and is not subject to regulation within the United States. The benefits provided by the Trust are only applicable while you are outside of the territorial boundaries of the United States. To participate in this Trust, it is necessary for you to contact the Trust.*

Gallagher Charitable can help you arrange Medical Professional Liability benefits via the Medical Professional Liability Summary. The Trust provides for benefits while traveling outside of the USA for both short-term and career medical missionaries and related medical personnel.

**Limited to \$500,000 per occurrence with \$5,000 retention per claim, per practitioner. Applies to occurrences outside of home country and the U.S. with worldwide jurisdiction.**

You are not enrolling for temporary benefits issued directly to you, an individual. There is a master policy issued to the Medical Professional Liability Summary. Applicants who pay the participation fee are considered Trust participants and are covered for incidents occurring during their declared dates of participation. The benefits are still effective after they return from their trip as it does not expire. The Trust agreement is renewed annually and therefore protects participating practitioners from trailing claims.

### Limitations and Exclusions

#### Communicable Disease Exclusion Clause

It is Understood and agreed that Underwriters will not defend any Claim, or pay any Damages or Claims Expenses of whatsoever nature, directly or indirectly caused by, arising out of, related to, composed of or resulting from or in connection with any Communicable Disease and/or any Pathogen capable of producing Communicable Disease or the perceived threat or fear thereof, regardless of any other cause or event contributing concurrently or in any other sequence to such Claim, Damages, or Claims Expense.

This Endorsement also excludes any loss, damage, cost or expense of whatsoever nature directly or indirectly caused by, arising out of, related to, composed of or resulting from or in connection with any action taken (or any failure to take action) in controlling, preventing, suppressing or in any way relating to any Communicable Disease and/or any Pathogen capable of producing Communicable Disease.

For purposes of this exclusion:

Communicable Disease means an illness caused by a Pathogen where the method of transmission, whether direct or indirect, includes but is not limited to, airborne transmission, bodily fluid transmission, transmission from or to any surface or object, solid, liquid or gas or between organisms; and where that disease or condition and/or spread thereof has been categorized or otherwise described in terms consistent with:

- (i) a public health emergency of national or international concern;
- (ii) an epidemic; or
- (iii) a pandemic

by any organization or government agency with responsibility for the monitoring of public health and/or disease control in the country or territory where the insured loss is located or by the World Health Organisation (WHO).

Pathogen means an infectious agent or its toxins, including but not limited to bacteria, viruses, fungi, parasites, yeasts, molds and other microorganisms, whether man-made or naturally occurring.

**Participation Fee:** Applicants are required to participate at highest level of licensure, regardless of the actual procedures that will be performed while abroad.

*Applicants may enroll by sending the completed form below to:*  
[Gallagher Charitable\\_MPL@ajg.com](mailto:Gallagher_Charitable_MPL@ajg.com).

Applicants will receive an email confirmation at the completion of their enrollment. Payment may be made via a check or credit card. For check payments, please include a copy of the confirmation with the payment.

Checks should be made payable to [Gallagher Charitable](#) and mailed to:

#### Gallagher Charitable

ATTN: Medical Professional Liability  
P.O. Box 2860  
Greenville, SC 29602

Claims: In the event of a claim, please contact Gallagher Charitable International Insurance Services staff:

P: 800.922.8438 | F: 864.239.2435 | [gcclaims@ajg.com](mailto:gcclaims@ajg.com)

[www.TravelwithGallagher.com](http://www.TravelwithGallagher.com)

Gallagher Charitable



# Volunteer Travel Summary

By requesting that we enroll you or your group, you are agreeing to participate in the International Helpers (Guernsey) Trust (IHT) for certain benefits and services. The Trust Participation Agreement is attached for signature and return with enrollment. Services & Benefits are provided by service contracts & insurance policies issued to IHT.

## Limitations and Exclusions

\*The cost of a security evacuation is only covered up to \$1,000 in countries and regions deemed severe risk by World Aware, unless the volunteer is already in the country and covered by this plan when the country or region is elevated to severe status. World Aware cannot guarantee service in Severe Risk areas. If you have questions about the risk level of your destination country, please contact us.

\*\*While World Aware will deploy a specialist or negotiator as needed, this benefit **does not** pay ransom amounts.

\*\*\*Optional Excess Medical Expenses are available for purchase at a daily rate in addition to the base participation fee. **No excess benefits are available to participants under age 12 or over age 70.** All participants do receive \$10,000 in primary medical expenses with their base participation fee regardless of age.”

This brief summary is not an insurance policy; rather, it outlines some of the features of these benefits. An Aggregate Limit of \$20,000,000 applies to the above benefits. This limit provides the full \$100,000 AD&D benefit for up to 200 persons in a common accident.

This program does not accept any claim over \$10,000 for medical benefits and \$100,000 for evacuation any way caused by or resulting from:

- a) Coronavirus disease (COVID-19);
- b) Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2);
- c) any mutation or variation of SARS-CoV-2.

Coronavirus, epidemic and/or pandemic:

Regardless of any provision to the contrary, the policy excludes any liability directly or indirectly caused by or resulting from, arising out of or in connection with or attributable to:

- a) any coronavirus (or similar or equivalent virus in the future), including any mutation or variation of a coronavirus;

- b) any coronavirus disease (or similar or equivalent disease in the future);
- c) any epidemic or pandemic which poses a threat to human health or human welfare whether officially declared an epidemic or pandemic or not; or
- d) any fear or threat of a), b) or c) above.

## Telemedicine

Benefits now include telemedicine. Doctors are available 24/7 to treat conditions such as infections, cold/flu, respiratory infections, sore throat, allergies, bronchitis, urinary tract infections, pink eye, abdominal pain, ear infections, rashes/poison ivy and many more, providing fast and convenient care for your medical needs with no consultation fee or copay.

Sending organization should ensure parental consent if participant is under 18 years of age.

## Crisis Triage

Benefits now include crisis triage. Crisis Triage provides guidance and support throughout any difficulty you may find yourself in during travel. If an evacuation is needed and desired, Concilium will be instrumental in assisting you in the process. They have extensive experience working with missions and nonprofit groups and will help the caller determine their options. Please note, the procedure of calling IMG Global Response has not changed as your call will be redirected to Concilium for crisis triage. This new benefit includes threat of COVID-19. This benefit can be used for expenses associated with travel for threat of COVID-19.

## Claim Provisions

To help facilitate prompt payment of claims, you should report all claims as soon as possible directly to:

Gallagher Charitable International Insurance Services  
P.O. Box 2860  
Greenville, SC 29602  
Phone: 800.922.8438 | Fax: 803.252.1988  
ihteligibility@imglobal.com

Written notice of claim must be given to us within 30 days after an injury, illness or loss occurs or begins. If such notice cannot be given during such time, then it must be done as soon as reasonably possible. The notice must include the claimant's name, your name and the confirmation number.