

**IMPORTANT: THIS IS A PLAN SUMMARY. TO OBTAIN YOUR FULL PLAN DETAILS AND INSURANCE POLICY PLEASE GO TO:**  
<https://trippreserverclaims.com/skipasspreserver> OR CALL 1-866-889-7409



## SKI PASS PRESERVER PROGRAM

This brochure provides a broad overview of your policy provisions and does not revise or amend the policy. Insurance coverages are underwritten by [Arch Insurance Company](#). Your policy is the contract that specifically and fully describes your coverages. Certain restrictions and exclusions apply and coverages may vary in certain states. Please refer to your [policy](#) for detailed terms and conditions.

To obtain a copy of your full travel insurance plan details, please call 1-866-889-7409 or visit online at:  
<https://trippreserverclaims.com/skipasspreserver>

Benefits	Maximum Benefit Limit	Description
Season Pass Cancellation	Season Pass Cost	Reimbursement for the cost of a Season Pass less any refunds you received when you are unable to use your Season Pass due to a covered unforeseen reason*.
Season Pass Interruption	Pro-rated Season Pass Cost	Reimbursement for the pro-rated cost of the Season Pass less any refunds you received when you are unable to use the remaining portion of your Season Pass due to a covered unforeseen reason*.

\* Covered Unforeseen reasons include:

- Your or a Family Member's death, Sickness or Injury.
- Your primary place of residence or destination is made Uninhabitable and remains Uninhabitable during the Season Pass Coverage Period, by fire, flood, or other Natural Disaster, vandalism, or burglary of Your principle place of residence;
- Your transfer of employment of 100 miles or more by the employer with whom You or Your are employed on Your Effective Date which requires Your principal residence to be relocated;
- revocation of Your previously granted military leave or re-assignment. Official written notice of the revocation or re-assignment by a supervisor or commanding officer of the appropriate branch of service will be required;
- Your pregnancy, provided the pregnancy occurs after Your Effective Date for Season Pass Cancellation, as verified by medical records

For a complete list of covered reasons and exclusions, call 1-866-889-7409 or view policy details online at  
<https://trippreserverclaims.com/skipasspreserver>

### IMPORTANT PROVISIONS IN YOUR POLICY:

- You must advise the Travel Supplier or Property Management Company and Us as soon as possible in the event of a claim. We will not pay benefits for any additional charges incurred that would not have been charged had You notified the Travel Supplier or Property Management Company as soon as reasonably possible.
- Pre-existing conditions are not covered under the policy.
- If you have a claim, it must be reported to us within 30 days after a loss or as soon as is reasonably possible:

Red Sky Travel Insurance  
c/o Arch Insurance Company  
Executive Plaza IV  
11350 McCormick Rd., Suite 102  
Hunt Valley, MD 21031  
Phone: 1-866-889-7409  
Fax: 1-443-279-2901  
Email: [redsky@archinsurance.com](mailto:redsky@archinsurance.com)  
Office Hours: Monday-Friday, 8:30am – 5pm EST