

365

CAP MULTI TRIP ANNUAL PLAN

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WHAT TO DO IN THE EVENT OF A CLAIM?

HOW TO DEAL WITH AN EMERGENCY?

HOSPITALIZATION, MEDICAL EXPENSES, REPATRIATION-ASSISTANCE...

Call immediately our assistance teams as soon as possible.

You always need our approbation before medical intervention, also for medical expenses

Indicate:

- Your contract number regarding N° 58 224 499,
- The assistance nature needed
- Your firstname/name
- your phone number



Call our assistance 24/7 :
+33 (0)1 41 85 93 16



Attention! You always need our approbation before medical intervention

KEEP MEDICAL RECEIPT ON YOU THEY CAN ASK FOR IT

OTHERS GUARANTEE

BAGGAGE, CIVIL LIABILITY, CANCELLATION ...

- keep your Chapka contract number.
- Make a claim :
 - within 5 days for insurance guarantees
 - within 2 days, in case of baggage theft

Attention in case of baggage theft :

The insured has to report it to the police station around 24h

Following claim date

Only objects declared on the police report will be covered

Attention in case of cancellation :

The insured has to call the airlines/travel agency etc.. straight away and proceed cancellation trip



Make a claim online

<https://sinistre.europ-assistance.fr/>

Or on the phone :

01 41 85 90 72

(this number is only used to deal with administration follow-up)

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MULTI-RISK - CONTRACT EUROP ASSISTANCE 58 224 499

TABLE OF BENEFITS

ASSISTANCE SERVICES

AMOUNTS INCLUDING VAT*/PER PERSON

PERSONAL ASSISTANCE IN THE EVENT OF AN ILLNESS OR AN ACCIDENT	
Transport/Repatriation	Actual costs
Return of insured family members or two insured accompanying persons	Return ticket
Bedside Companion	Round trip ticket
Trip extension (return to your trip destination)	Additional transport costs 500 € max.
Driver replacement	One-way ticket or driver (3 days max)
Extended trip	Hotel 100 €/ night (max 10 nights)
Early return in the event, a family member is admitted to a hospital	Transport ticket
MEDICAL COSTS	
Additional refund of medical costs and advance on hospitalization costs (in foreign countries only)	300,000 € / person and 600,000 € / event
Dental emergency	300 €
Medical cost deductible	30 €
ASSISTANCE IN THE EVENT OF DEATH	
Repatriation of your remains	Actual costs
Casket or urn costs	3,000 €
Return of family members	Return ticket
Early return in the event of the death of a family member	Transport ticket

ASSISTANCE SERVICES

AMOUNTS INCLUDING VAT*/PER PERSON

TRAVEL ASSISTANCE DURING THE TRIP	
Legal bail assistance in a foreign country	15,000 €
Coverage of legal representation fees in a foreign country	5,000 €
Sea search and rescue costs	5,000 €/person and per event
Forwarding of medication	Forwarding costs
Assistance in the event of the theft, loss or destruction of identity documents or means of payment	Cash advance of 2,300 €
Early return in the event of serious damage at the home	Transport ticket
TRAVEL ASSISTANCE AFTER THE TRIP	
Domestics Services	20 €/hour and max 20 hours
Care Taker	30 €/hour and maximum 20 hours
Child Care	24 hours maximum
Pet Care	20 €/day and maximum 10 days
Teaching support	15 h/week 1 month maximum
TRIP CANCELLATION	
	Depending on the cancellation fee terms and conditions 7,500 € max./person And 15,000 € / year 30,000 € max./event
Death or admission to the hospital	Excess 30 € / person
Other medical reason	10% deductible with a minimum of 50 € per person
Cancellation for all other reasons	15 % deductible with a minimum of 70 € per person
BAGGAGE AND PERSONAL EFFECTS	
Theft, total or partial destruction, loss during transport by a transport company	2,000 €/person and 10,000 € / event
Valuables Deductible	limited to 50% of the coverage amount 30 € / file
Compensation for late luggage delivery	300 €
THIRD-PARTY LIABILITY IN A FOREIGN COUNTRY	
Overall cover cap including Bodily injury damage and direct loss resulting from a consecutive covered Bodily injury	3,000,000 €/event and limited to 1,500,000 € for the USA/Canada
Including damage to property and a direct loss resulting from a covered property damage	150,000 € /event
Deductible	150 €/file
RENTAL CIVIL LIABILITY IN A FOREIGN COUNTRY	
Overall cover cap	100,000 €/event
Deductible	80 €

ASSISTANCE SERVICES

AMOUNTS INCLUDING VAT*/PER PERSON

PERSONAL TRAVEL ACCIDENT COVERAGE	
Lump sum in the event of death	Maximum 30,000 €/event
Permanent disability lump sum	Maximum 75,000 €/event
Deductible	10 %
MISSED CONNECTION	
Delay > 6 hours leading to a missed connection	Refund on spending with supporting documents: accommodation, meal and transfer costs with a maximum of 300 €
TRIP INTERRUPTION COSTS	
Refund of the unused portion of the pre-paid travel arrangements in the event of a medical repatriation or an early return	Pro-rated in time with a maximum of 5,000 € max./person and 15,000 € max./event
DELAYED FLIGHT	
On regular one-way or round-trip flights: delay > 4 hours On one-way charter flights: delay > 6 hours	Max. 300 €/person and 900 €/event
IMPOSSIBLE RETURN	
Payment of accommodation, meals and first necessity items with supporting documents in the event of a return impossible on the initially planned return date	100 €/night and per person with a maximum of 5 nights
"SPORTS AND LEISURE" PACK	
INTERRUPTION OF SPORTS AND LEISURE ACTIVITIES	
Refund of ski passes and ski lessons following an accident	Pro-rated in time with a maximum of 300 €/person and 600 €/event
ACCIDENTAL DAMAGE TO SPORTS EQUIPMENT	
The breaking of personal or rented ski equipment: refund of rental costs	150 €/person and 300 €/event maximum
SPORTS AND LEISURE INSURANCE LIABILITY	
Overall cover cap	150,000 €/event
Including bodily injury damage and a direct loss resulting from a covered bodily injury	150,000 €/event
Including damage to property and a direct loss resulting from a covered property damage	50,000 €/event
Deductible per claim	150 €
MOUNTAIN SEARCH AND RESCUE COSTS	
Mountain search and rescue	5,000 €
Rescue on marked tracks	Max 8 000 €/event

DATE OF EFFECT AND DURATION OF COVERAGE

COVERAGE	EFFECTIVE DATE	EXPIRATION OF COVERAGE
TRIP CANCELLATION	The Day this contract is subscribed to.	The day of the departure (at the organiser's meeting point on the outbound trip).
OTHER INSURANCE COVER AND ASSISTANCE SERVICES	The day of the departure (at the organiser's meeting point on the outbound trip).	On the day of the return from the trip (group dispersal point). Caution, in all cases, our coverage will cease automatically 90 days after the departure date.

SOME ADVICE

BEFORE TRAVELLING TO A FOREIGN COUNTRY

- Remember to take the forms for the length and type of trip you are going on, as well as for the country you are travelling to (there is a specific legislation for the European Economic Area). These different forms can be obtained from your local Health Services so that, if you become ill or are in an accident, your medical costs will be directly covered by your Government Health Services

- When travelling to countries outside of the European Union and the European Economic Area (EEA), before leaving you should find out whether this country has a social security agreement with France. To do this, you must ask your Health Service if you are in the scope of application of the agreement and whether there are any formalities to complete (forms, etc.).

To obtain these documents you should contact the appropriate organizations before your departure (in France contact your Health Services).

- If you are taking a treatment, remember to take your medication with you and check on its transport requirements depending on your means of transport and destination.

- As we cannot be a substitute for emergency services, and especially if you are going to take part in physical or motorized activities that have an element of risk, or if you are travelling to an isolated area, we recommend that you make sure that an emergency rescue system has been set up by the appropriate authorities in the country to answer any possible rescue requests.

- If you lose your keys, or if they are stolen, it might be important to have their number close by. Make sure you note these numbers down.

- Similarly, if your identification documents or your means of payment are lost or stolen, it is easier to replace them if you have made copies and noted down your passport, identity document and bank card numbers, and if you keep them separate from the originals.

WHEN ON SITE

If you become ill or are injured, contact us as soon as possible after having called the emergency services (Ambulance, fire brigade, etc.) for which we cannot be a substitute.

CAUTION

Some medical conditions may be excluded from the contract's application terms. We recommend that you read the General terms and conditions carefully.

GENERAL INSURANCE AND ASSISTANCE DETAILS

1. PURPOSE OF THE CONTRACT

The purpose of these General terms and conditions applicable to the insurance and assistance contract signed between EUROP ASSISTANCE (a company governed by the French Insurance Code) and the Subscriber, is to define the rights and duties of EUROP ASSISTANCE and the Policy holders defined below. This contract is governed by the French Insurance Code.

2. DEFINITIONS

DEFINITIONS COMMON TO INSURANCE AND ASSISTANCE

For the application of this contract, the terms below are defined as follows:

ACCIDENT (PERSONAL)

A sudden and unexpected event caused by the sudden effects of an external factor suffered by the Policy holder and not intended by the Policy holder.

ACT OF TERRORISM

Any violent, criminal or illegal act committed against people and/or property in the country in which you are travelling, the purpose of which is to seriously threaten public order through intimidation and terror, and which is the subject of media coverage.

CLAIM

A claim is any unexpected event of a type that is included in the cover provided by this contract.

DROM

DROM refers to Guadeloupe, Guyana, Martinique, Mayotte and Reunion.

EUROPEAN UNION

European Union refers to the following countries: Germany, Austria, Belgium, Bulgaria, Cyprus, Croatia, Denmark, Spain, Estonia, Finland, France, Greece, Hungary, Ireland, Italy, Latvia, Lithuania, Luxembourg, Malta, Holland, Poland, Portugal, Czech Republic, Romania, United Kingdom, Slovakia, Slovenia, Sweden.

EVENT

Any situation defined by these General terms and conditions to be a cause of a request to the Insurer to provide cover.

EXCESS

The share of the costs that remains at your expense.

FAMILY MEMBER

Family member means, the spouse, civil partner, or partner living under the same roof, the Policy Holder's legitimate, natural and adopted children, their father and mother, brothers and sisters, grandparents, parents-in-law (i.e. the spouse's parents), and grandchildren.

FOREIGN COUNTRY

The term Foreign country covers all countries except your country of Residence and the excluded countries.

HOME ADDRESS

Your main and usual place of residence, declared as such on your income tax returns is considered to be your Residence. It is located within the European Union, Switzerland, Monaco, the DROM and the POM/COM.

HOSPITALIZATION

Any admission of a Policy holder to a hospital centre (hospital or clinic) proven by a hospital admissions form prescribed by a medical doctor, consecutive to an Illness or Accident, and requiring at least one night in the establishment.

ILLNESS

A pathological condition diagnosed by a medical doctor, which is of a sudden and unforeseeable nature and requires medical attention.

IMMOBILIZATION

Physical (total or partial) incapacity to travel confirmed by a doctor following an Illness or an Accident and requiring rest at home or on site. It must be supported by a medical certificate or, depending on the Policy holder in question, by a detailed

sick leave certificate.

INSURANCE / ASSISTANCE

EUROP ASSISTANCE, Private Limited Company with equity capital of 35,402,786 €, Company governed by the French Insurance Code, registered at the Nanterre company registration Office under the number 451366405, of which the registered office is located at 1, promenade de la Bonnette – 92230 Gennevilliers – France, acting through its Irish subsidiary of which the commercial name is Europ Assistance Irish Branch and of which the registered office is located at 4th Floor, 4-8 Eden Quay, Dublin 1, D01 N5W8, Ireland, registered at the Irish Company Registration Office under the number n° 907089. The Insurer's controlling authority is the ACPR, "Autorité de contrôle prudentiel et de résolution", located at 4 place de Budapest – CS 92459 – 75436 PARIS cedex 09. The solvency report is available on the following web site: www.europ-assistance.fr

NATURAL DISASTER

A natural phenomenon such as an earthquake, a volcanic eruption, a tidal wave, a flood or a natural disaster caused by the abnormal intensity of a natural agent and recognized as such by the public authorities in the country in which it occurs.

POLICY HOLDER

The private persons named by the Subscriber are considered to be Policy holders. These persons must have their place of residence inside the European Union, Switzerland, Monaco, the DROM (French overseas territories) and the POM/COM.

In this contract, Policy holders are also referred to as "you".

POM/COM:

POM/COM refers to Saint Pierre et Miquelon, Saint Barthelemy, Saint Martin, Wallis and Futuna, French Polynesia and New Caledonia

SEASONAL RENTAL

Seasonal rentals signed by the Policy holder through a rental organisation organization or directly with a private individual must meet all the following conditions:

- the rented premises can be any type of accommodation in a building, including bed and breakfast, caravans, camping-cars, house-boats and mobile homes,
- the premises must be located in France or in a Foreign country,
- the premises must be furnished,
- the rented premises must not be the Policy holder's official residence,
- the length of the rental period must be up to a maximum of 90 days in a row, non-renewable, and for leisure purposes,
- the Policy holder must not be the owner, bare-owner, life tenant or occupier free of charge of the rented premises.

SUBSCRIBER

The Chapka non-profit organisation, of which the registered office is located at 31-35 rue de la Fédération 75717 Paris Cedex 15 France declared to the Préfecture, which has subscribed to the Cap Multi Voyages insurance on behalf of its members (hereinafter the Policy holders),

SPECIFIC INSURANCE DEFINITIONS

For the application of this contract, the terms below are defined as follows

CANCELLATION

The pure and simple withdrawal from the trip you have reserved consecutive to reasons and circumstances qualifying for the "trip cancellation" cover which are listed in the "trip cancellation" section.

HOLIDAY HOME

Accommodation of which you are the owner, located in your country of Residence, other than your place of Residence, which you use for leisure and holiday purposes.

MAJOR EVENT AT THE DESTINATION

In the framework of this contract there are three causes that may constitute a Major event:

- major climatic events that fulfil all the following conditions: climatic events such as flooding caused by a river bursting its banks, flooding from run-off water, flooding and mechanical shocks caused by the action of waves, sea flooding, mud slides and lava flows, tidal waves, earthquakes, volcanic eruptions, cyclones and abnormally intense storms that, if they occur in France, are the subject of a Natural Disaster order or, if they occur in a Foreign country, cause severe material damage and/or human loss of life and injury,
- major health events in the destination country or zone listed by the World Health Organization and leading to an epidemic or a pandemic risk,
- major political events, both in terms of intensity and duration, causing either serious disturbances to public order within a State, or armed conflict between several States or within a single State between armed groups. These are the areas or countries for which the French Ministry of foreign and European affairs has issued a formal travel warning.

OBSOLESCENCE

The depreciation in the value of goods on the day of the Claim due to their oldness.

SERIOUS ACCIDENT

A sudden and unexpected event caused by the sudden effects of an external factor suffered by a physical person, not intended by the victim, and resulting in the impossibility of the Policy holder to travel by their own means

SERIOUS ILLNESS

A pathological condition diagnosed by a qualified medical doctor that strictly prevents leaving the Residence, requires urgent medical care and the complete halt of all professional activity.

THIRD PARTY

All physical persons or legal entities except:

- the Policy holder, their Family members, as well as their direct ascendants and descendants, and the persons accompanying them.
- employees or agents who work for the same employer as the Policy holder.
- any person sharing accommodation and/or travelling with the Policy holder.

WEAR AND TEAR

The depreciation in the value of goods on the day of the Claim, from their use or their maintenance conditions.

3. WHAT TYPES OF TRIP ARE COVERED?

The insurance coverage and assistance services apply to trips:

- for leisure, packages, rentals, cruises, travel tickets (including flight only) booked with the contract trip organizer which is the Subscriber to the contract, and of which the dates, destination and price feature on the invoice issued by the trip organizer Subscriber to the contract.
- and of which the duration is not in excess of 90 consecutive days.

4. WHAT IS THE CONTRACT'S GEOGRAPHICAL COVERAGE?

Insurance cover and assistance services apply worldwide, outside your Residence.

EXCLUSIONS: in general, countries in a state of civil war or at war with a foreign country, in a state of known political instability, or subject to popular uprisings, riots, acts of terrorism, reprisals, restriction to the free movement of persons and property (for whatever reason, especially health, security, weather related, etc.) or the disintegration of the atomic core and any radiation from a radioactive energy source are excluded.

To obtain information before your departure, please contact our points of sale or our Customer Relations Department at +33 1 41 85 85 41.

5. HOW TO USE OUR SERVICES

A. IF YOU NEED ASSISTANCE

In an emergency it is essential to contact primary local emergency services for all problems they can cover.

In all cases, our intervention cannot be a substitute for the intervention of local public services, or of any organization we would have a duty to call upon under local and/or international regulations.

In order to make it possible for us to take action: we recommend you prepare your call.

We will request the following information:

- your surname and first name(s),
- your exact location, the address and a phone number where we can reach you,
- your contract number 58 224 499

You must imperatively:

- call us at the the following phone number without delay: 01 41 85 93 16 (from outside France +33 1 41 85 93 16), fax: 01 41 85 85 71 (+33 1 41 85 85 71 from outside France).
- obtain our prior approval before taking any initiatives or committing to any expenditure,
- comply with the solutions we recommend,
- provide us with all the elements relative to the subscribed contract,
- supply all supporting documents for the expenditure for which you are claiming the refund.

B. WHAT ARE THE APPLIED CONDITIONS FOR THE COVERAGE AND ASSISTANCE SERVICES

We reserve the right to request any proof to support any request for assistance or insurance claims (death certificate, proof of family relationship, children's date of birth, proof of Residence, proof of expenses, and your Notice of Assessment on condition that all information on it other than your name, address and persons living in your tax household have been redacted).

We will take action on the strict condition that the Event concerned by the cover was uncertain at the time the policy was taken out and on the departure date and time.

Any event, the origin of which is a pre-existing illness and/or injury that has been diagnosed and/or treated by continuous hospitalization, day hospitalization or outpatient hospitalization during the 6 months prior to the request for assistance cannot be covered, whether the event is the appearance or the deterioration of the said condition.

If EUROP ASSISTANCE is led to initiating an intervention because there are no verifying elements available, or because insufficient or incorrect elements have been provided relative to the information that must be given to EUROP ASSISTANCE, the cost of the intervention initiated by EUROP ASSISTANCE will be invoiced to the Subscriber and payable on receipt. If the Subscriber wishes, they can recover the amount from the person who requested the assistance if this person is not the Policy holder.

C. YOU WISH TO MAKE A CLAIM COVERED BY THE INSURANCE COVERAGE:

Within 5 working days from the moment you become aware of the Claim, Within 2 working days from the moment you became aware of the claim for the "Luggage and personal effects" cover in the event of theft, and within 5 days in all other cases, you or a person acting on your behalf, must declare your claim online on our web site:



EUROP ASSISTANCE

Service indemnités

or by means of the following:
<https://sinistre.europ-assistance.fr/>

1, promenade de la Bonnette
 92633 Gennevilliers cedex

Fax : 01 41 85 85 61

e-mail : slv@europ-assistance.fr

Fax : 01 41 85 85 61

Phone. : 01 41 85 90 72* between 9 am and 6 pm from Monday to Friday

*This number is reserved for compensation requests and case follow-up only

If you do not meet this deadline, you will lose the benefits of your insurance coverage for this Claim if we can establish that the delay was prejudicial to us.

D. MULTIPLE COVERAGE

If the risks covered by this contract are also covered by another insurance policy, you must inform us of the name of the insurance company with which the other policy was taken out (article L 121-4 of the French Insurance Code) as soon as you become aware of this information, and at the latest when making the Claim.

E. FALSE DECLARATIONS

When they change the subject of the risk or reduce our opinion of the risk:

- if you withhold information or deliberately make false declarations your contract will be null and void. The premiums paid remain in our possession and we will be entitled to demand the payment of all due premiums as defined by article L 113-8 of the French Insurance Code,
- if you withhold information or make incorrect declarations but it cannot be proved that you did so intentionally, the contract will be terminated 10 days after notice sent to you by registered letter and/or the application of reduced compensation in compliance with article L 113-9 of the French Insurance Code.

F. CANCELLATION OF ASSISTANCE AND COVERAGE DUE TO FRAUDULENT STATEMENTS

In the event of a Claim or a request for assistance under assistance and/or insurance coverage (as defined in these General terms and conditions), if you knowingly use incorrect documents as elements of proof or use fraudulent practices or make false statements or withhold information, you will forfeit all entitlement to the assistance services and insurance coverage defined in these General terms and conditions for which these statements are required.

6. WHAT SHOULD YOU DO WITH YOUR TRAVEL TICKETS?

When transport is organized and paid under the contract's coverage, you undertake either to reserve us the right to use the transport tickets in your possession, or to refund us the amount of the refund you obtain from the organization that issued your transport tickets.

DETAILS OF BENEFITS

TRIP CANCELLATION

1. WHAT WE COVER

We will refund all deposits, modification costs or any amounts kept by the trip organizer under the trip sale terms and conditions (except for administration fees, the insurance premium and the airport taxes that are refunded by the transporter) when you are forced to cancel or modify your trip before the departure date.

Please note that airport taxes included in the ticket price are fees linked to the actual boarding of passengers and that the airport operator has a duty to refund these amounts if you do not board a plane. You should read the general sale or transport terms and conditions to find out the procedure to obtain a refund of these taxes (article L 113-8 of the French Consumer Code).

2. WHEN DO WE PROVIDE COVER?

We provide cover exclusively for the reasons and circumstances listed below.

SERIOUS ILLNESS, SERIOUS ACCIDENT OR DEATH

(including the deterioration of anterior illnesses and the after effects of a previous accident):

- of yourself, your spouse or partner, or the person accompanying you on condition that they feature on the same invoice for this insurance policy,
- of your ascendants or descendants and/or those of your spouse or partner or of the person accompanying you, on condition that they feature on the same invoice for this insurance policy,
- of your brothers and sisters.

CANCELLATION FOR ANY JUSTIFIED REASON

You are covered, with an Excess and a minimum indicated in the Table of Coverage Amounts:

- for all cases of cancellation that were unforeseeable on the date this contract was subscribed to, independent of your will and justified,
- as well as for the Cancellation for a justified reason of one or more persons registered at the same time as yourself and who are Policy holders under this contract,

- as well as in the case of a Terrorist attack or Major event occurring within a radius of 100 kilometres of your holiday location during the 8 days before the departure date, by waiver of the "What are the limitations in the event of force majeure or other equivalent events?" paragraph in the "contract framework" section,

The "Trip cancellation" coverage does not cover the impossibility of leaving for the trip caused by the material organization of the trip by the organizer (tour operator, airline), including for flights only and/or their failure (strike, cancellation, postponement, delay), or the accommodation conditions and the safety of the destination.

3. WHAT WE EXCLUDE

In addition to the general exclusions applicable to the contract featured in the "What are the general exclusions applicable to the contract?" paragraph in the "CONTRACT FRAMEWORK" section, the following are excluded:

- cancellation caused by a person who was hospitalised when you booked your trip or subscribed to this contract,
- illness requiring medication-based mental health and/or psycho-therapeutic treatments (including for nervous breakdown) except when it has resulted in hospitalisation in excess of 4 consecutive days on the date your trip was cancelled,
- forgotten vaccines,
- accidents resulting from the practise of the following sports: bob-sleigh, rock climbing, skeleton, mountain climbing, competitive sledge riding, all aerial sports, as well as those resulting from the participation in or training for matches or competitions,
- the failure, for any reason whatsoever, to present essential travel documents such as a passport, visa, travel tickets, vaccination certificates, except in the event of a theft of the passport or identity card on the date of departure and correctly declared to the relevant authorities,
- illnesses and accidents that have already been diagnosed or declared, relapses, deterioration or a hospitalization between your trip purchase date and the date this contract was subscribed to,
- administration fees, taxes, visa fees and insurance premiums relative to the trip.

4. WHAT IS THE AMOUNT OF OUR COVER?

We cover the trip cancellation or modification costs incurred on the date the Event that may trigger the cover to be used, in compliance with the trip organizer, Subscriber to the contract's general sales terms and conditions, with a maximum and an Excess indicated in the Table of Coverage Amounts.

5. HOW LONG DO WE HAVE TO MAKE THE CLAIM?

You must notify your trip organizer Subscriber to the contract immediately and notify us within the 5 working days following the Event that triggers the cover. To do this, you must send us your claim declaration.

In the event of late Cancellation and/or declaration, we will only pay the Cancellation fees payable on the date of the Claim event that triggered the Cancellation.

COVER LIMITS

The compensation due under this cover cannot exceed the actual penalty amounts invoiced consecutive to the trip cancellation or modification. Administration fees, taxes, visa fees and insurance premiums are not refundable.

6. WHAT ARE YOUR DUTIES IN THE EVENT OF A CLAIM

Your declaration must be accompanied by:

- in the event of an Illness or an Accident, a medical certificate indicating the origin, type, seriousness and foreseeable consequences of the Illness or Accident, as well as a copy of the sick leave certificate if you are an employee, and copies of prescriptions featuring the labels of the prescribed medication or possibly copies of the medical analyses and examinations carried out,
- in the event of death, a death certificate and a certificate proving the family relationship,
- in other cases, any documents supporting the reason for the cancellation or modification.

It is mandatory to insert the medical certificate in a sealed envelope addressed to the medical expert we indicate.

To this effect you must release your doctor from any medical privilege relative to this medical expert. The policy holder claiming coverage must provide all the contractually required documents without the possibility of giving any reasons preventing them from doing so other than a case of absolute necessity. Failing to do so will result in the cover being declared void. If you refuse without any valid reason, you will risk the loss of your entitlement to the cover.

You explicitly agree to our right to subject the cover to the compliance with this condition.

You must also send us any information or documents proving the reason for your Cancellation, in particular:

- Social security statements or statements from any similar organization concerning the refund of treatment costs and the payment of daily compensation,
- the original copy of the cancellation invoice drawn up by the trip organizer who Subscribed to the contract;
- your contract number,
- the subscription document issued by the travel agent or the trip organizer Subscriber to the contract,
- for an Accident, you must give the causes and circumstances and provide the names and addresses of liable parties and, if possible, witnesses.

ASSISTANCE SERVICES: WHAT WE COVER

PERSONAL ASSISTANCE IN THE EVENT

ASSISTANCE

OF AN ILLNESS OR AN ACCIDENT DURING THE TRIP

1. TRANSPORT/REPATRIATION

If you fall ill or are injured during your trip, our medical doctors will contact the local doctor who treated you for the Illness or the Accident.

The information collected from the local doctor and eventually the usual general practitioner, after a decision by our doctors based only on medical requirements, allows us to trigger and organise:

- either your return to your Residence,
- or your transport, where applicable under medical supervision, to a suitable hospital establishment close to your Residence,

by a light ambulance vehicle, by ambulance, by train (seat in 1st class, 1st class sleeper, or sleeper train), by plane or by medical air transport.

Similarly, exclusively based on medical requirements and on decision by our doctors, we can, in some cases, initiate and organise initial transport to a local healthcare centre before considering a return to an establishment near your Residence.

Only your medical condition and compliance with applicable health regulations are considered when deciding on transport, the choice of means of transport, and the choice of the eventual location for hospitalisation.

IMPORTANT

In this context, it is explicitly agreed that the final decision will be made by our medical doctors in order to avoid any conflict of medical authority.

Furthermore, if you refuse to accept the decision considered by our medical doctors to be the best, you release us from liability, especially if you return by your own means or if your medical condition worsens.

2. RETURN OF THE POLICY HOLDER'S FAMILY MEMBERS OR OF TWO ACCOMPANYING POLICY HOLDERS

When we repatriate you, and depending on our Medical Service's opinion, we organize the transport of your insured Family members or of 2 policy holders who were travelling with you to accompany you on your return, if possible.

This transport will be:

- either with you,
- or individual.

We will cover the transport of these policy holders by train in 1st class, or by plane in economy class.

This cover cannot be combined with the "HOSPITALIZATION PRESENCE" cover.

3. HOSPITALIZATION PRESENCE

When you are admitted to a hospital in the place you become ill or had an Accident, and our medical doctors, based on the information provided by local doctors, decide that you are not fit to return within 2 days, we will organize the round trip from your Country of Residence by rail in 1st class or by plane in economy class for a person of your choice to travel to your bedside.

We will also pay for the person's hotel costs (room and breakfast), up to the amount indicated in the Table of Coverage Amounts.

This cover cannot be combined with the "RETURN OF INSURED FAMILY MEMBERS OR OF TWO ACCOMPANYING POLICY HOLDERS" cover.

4. TRIP CONTINUATION

If you become ill or are injured during your trip, but your state of health does not require your medical repatriation, depending on the opinion of our doctors in compliance with the terms of the "TRANSPORT/REPATRIATION" paragraph, we will pay for the possible extra transport costs that you incur to continue the interrupted trip, within the limits of the price of the return trip to your Residence on the date and from the location of the incident.

5. REPLACEMENT DRIVER (ONLY ZONES 1 AND 2)

If you become ill or are injured during your trip and your state of health prevents you from driving your vehicle, and if none of the passengers can replace you, we will make available:

- either a driver to take the vehicle back to your Residence using the most direct route

We will cover the driver's travel expenses and salary,

- or a 1st class train ticket or economy class plane ticket either for you to recover your vehicle at a later date, or for a person of your choice to bring the vehicle back.

Driving costs (fuel, possible tolls, ferries, hotel and restaurant costs for possible passengers) remain at your expense.

The drivers operate under regulations applicable to their profession. This cover applies if your vehicle is properly insured and in perfect working order, compliant with the national and international Highway codes and has met mandatory MOT standards. Failing this, we reserve the right not to send a driver and in replacement we will provide you with a 1st class train ticket or an economy class plane ticket so that you can go and collect the vehicle.

6. EXTENDED STAY

Following an Illness or an Accident during your trip, you are forced to extend your stay on site beyond the initially scheduled return date in the following cases:

- **In case of admission to the hospital:**

If you are admitted to the hospital and, in the light of the information communicated by the local doctors, our doctors consider that this hospitalization is necessary beyond your initial return date, we will pay for accommodation costs (room and breakfast) for an accompanying policy holder, **up to the amount indicated in the Table of Coverage Amounts**, so that they can stay with you. In the context of a tourist circuit or a cruise, these costs may be paid before the initial return date if there are additional accommodation costs that are not included in the trip package price paid by the accompanying policy holder.

- **In the event of immobilization:**

If you are immobilized and, in the light of the information communicated by the local doctors, our doctors consider that this Immobilization is necessary beyond your initial return date, we will pay for accommodation costs (room and breakfast) for yourself and/or an accompanying policy holder, **up to the amount indicated in the Table of Coverage Amounts**. In the context of a tourist circuit or a cruise, these costs may be paid before the initial return date if there are additional accommodation costs that are not included in the trip package price paid by yourself or the accompanying policy holder.

In both cases, our cover ceases on the day our medical doctors, after examining the information sent by the local medical doctors, consider that you are able to continue your interrupted trip or return to your Residence.

7. EARLY RETURN IN THE CASE OF ADMISSION TO THE HOSPITAL OF A FAMILY MEMBER

During your trip you are informed of the serious and unscheduled admission to the hospital during your trip and in your country of Residence:

- of a Family member,

In order for you to:

- travel to the bedside of the hospitalised person in your country of Residence,

We organise:

- either your round trip,
- or your one-way trip and that of a policy holder of your choice travelling with you,

and will pay for the tickets by train in 1st class or by plane in economy class to your country of Residence.

If you fail to send us documentary proof (admission documents from the hospital, proof of family relationship) within 30 days following the admission to hospital, we reserve the right to invoice you for the full covered costs.

8. ADDITIONAL REFUND OF MEDICAL COSTS (ONLY IN A FOREIGN COUNTRY)

To benefit from these refunds, you must be covered by national health primary cover (social security) or be covered by any other healthcare organisation and, on your return to your country of Residence or on site in the foreign country, carry out all the formalities required to recover these costs from the relevant organisations and send us the documentary proof mentioned below.

For the application of this service, please remember that the term "France" means continental France, Monaco and the DROM. Policy holders who reside in a DROM will not, therefore, be considered as travelling in a Foreign country when they are in continental France or Monaco, and vice versa.

Before travelling to a Foreign country, we advise you to obtain the forms suitable for the trip type and duration, as well as for the country you are travelling to (for the European Economic Area and Switzerland, apply for a European Health Insurance Card). These different forms can be obtained from your local Health Service so that, if you fall ill or are in an Accident, your medical costs will be directly covered by your Health Services.

TYPES OF HEALTHCARE COSTS ENTITLING TO ADDITIONAL REFUNDS:

The additional refund covers the costs defined below, on condition that they cover healthcare received in a Foreign country consecutive to an Illness or an Injury that occurred in a Foreign country:

- medical fees,
- cost of medication prescribed by a medical doctor or a surgeon,
- ambulance or taxi costs ordered by a medical doctor for local travel in a Foreign country,
- hospital costs if our medical doctors consider you cannot be transported after they have collected information from the local medical doctor. The additional refund of these hospital costs ceases on the day we are able to transport you, even if you decide to remain.
- dental emergency **within the limits of the amount indicated in the Table of coverage Amounts**.

REFUND AMOUNT AND PROCEDURE:

We will refund you the cost of healthcare incurred in a Foreign country and remaining at your expense once the Social security, mandatory private health insurance and/or any other provident society have made their payments **within the limits of the amounts in the Table of Coverage Amounts**.

An Excess, of which the amount is indicated in the Table of Coverage Amounts, is applied in all cases per Policy holder and for the duration of the contract.

You (or your beneficiaries) undertake to carry out all the necessary formalities to recover these costs from the organisations in question on your return to your country of Residence, and to send us the following documents:

- original social security statements and/or health insurance statements proving the refunds obtained,
- photocopies of the medical care invoices supporting the expenses.

If you fail to do so, we will not be able to proceed with the refund.

If Social security and/or the organisations you pay contributions to do not cover the paid medical costs, we will refund you **up to the maximum amount indicated in the Table of coverage**, for the duration of the contract, on condition that you first supply the original medical invoices and a certificate from Social Security, healthcare insurance or any other health insurance organisation stating that the costs are not covered.

9. ADVANCE ON HOSPITALIZATION COSTS (FOREIGN COUNTRY ONLY)

For the application of this service, please remember that the term "France" means continental France, Monaco and the DROM. Policy holders who reside in a DROM will not, therefore, be considered as travelling in a Foreign country when they are in continental France or Monaco, and vice versa.

If you fall ill or are injured during your trip to a Foreign country, as long as you are in hospital, we can advance your hospitalisation costs **up to the amounts indicated in the Table of Coverage Amounts**

This advance will be paid subject to meeting all the following conditions:

- for care prescribed in agreement with our medical doctors,
- as long as our medical doctors consider you cannot be transported based on information from the local medical doctor.

No advances are given from the day we are able to transport you, even if you decide to remain.

In all cases, you undertake to refund this advance payment at the latest 30 days after receipt of our invoice. If you fail to pay by this date, the Subscriber undertakes to refund us this advance within a maximum of 30 days from our request, and the Subscriber will be free to recover the amount from you, if it so wishes.

To be refunded yourself, you must follow the necessary procedure to recover your medical costs from the relevant organisations.

This duty is applicable even if you have undertaken the above refund procedures.

ASSISTANCE IN THE EVENT OF DEATH

1. CORPSE TRANSPORT AND CASKET COSTS FOR A DECEASED POLICY HOLDER

If the Policy holder dies during their trip, we will organise and cover the cost of the transport of the policy holder's corpse to the funeral location in their country of Residence.

We will also cover all the costs required for preparation treatments and other specific transport costs only, all other costs being excluded.

Furthermore, we will participate in the casket or urn costs that the family will purchase from the funeral contractor of their choice, **up to the amount indicated in the Table of coverage Amounts**, when the original invoice is provided to us.

The other costs (in particular the ceremony, local transport, burial) remain payable by the family.

2. RETURN OF THE POLICY HOLDER'S FAMILY MEMBERS IN THE EVENT OF THE DEATH OF A POLICY HOLDER

When applicable, we organise and pay for the return of the insured Family members who were travelling with the deceased, so that they can attend the funeral, if the initially

scheduled means of transport for their return to the country of Residence cannot be used.

3. EARLY RETURN IN THE CASE OF THE DEATH OF A FAMILY MEMBER

During your trip, you are informed of the death in your country of Residence, which occurred during your trip:

- of a Family member,

In order for you to:

- attend the funeral in your country of Residence,

We Organize

- either your round trip,
- or your one-way trip and that of a policy holder of your choice travelling with you,

and will pay for the tickets by train in 1st class or by plane in economy class to your country of Residence.

If you fail to send us documentary proof (death certificate, proof of family relationship) within 30 days, we reserve the right to invoice you for the full covered costs.

This service is provided when the funeral date is before the initially scheduled return date from your trip.

TRAVEL ASSISTANCE BEFORE AND DURING A TRIP

DURING THE TRIP

1. ADVANCE OF CRIMINAL BAIL AND PAYMENT OF LAWYER FEES (FOREIGN COUNTRY ONLY)

If you are the subject of proceedings while travelling in a Foreign country for a traffic accident, excluding any other causes: we will advance criminal bail **up to the amount indicated in the Table of Coverage Amounts**.

You undertake to refund this advance within 30 days of receiving our invoice, or as soon as the criminal bail has been returned to you by the authorities if this occurs earlier.

Furthermore, we will cover the cost of lawyer's fees that you have paid in that country, **up to the amount indicated in the Table of coverage**, on condition that the proceedings being taken against you in that country are not subject to criminal sanctions.

This cover does not cover the legal consequences in your country of Residence consecutive to a traffic accident in a Foreign country.

2. DISPATCH OF MEDICATION TO A FOREIGN COUNTRY

You are in a Foreign country and the medication that is essential to the continuation of your treatment, the interruption of which constitutes a risk to your health according to our medical doctors, has been lost or stolen. We will look for equivalent medication locally and, if we are successful we will organise a visit to a local medical doctor who can prescribe it for you. The medical costs and medication costs remain at your expense.

If no equivalent medication is available on site, we will organise the shipment of the medication prescribed by your doctor, from France only, on condition that your doctor sends our doctors a copy of the prescription they gave you and that the medication is available in dispensing chemists.

We will cover the shipping costs and will invoice the customs duties and the costs of purchasing the medication which you undertake to refund to us on receipt of the invoice.

These consignments are subject to the general terms and conditions of the transport companies we use. In all cases, they are subject to French regulations and conditions as well as to the national legislation of each country in matters of importing and exporting medication.

We decline all liability for the loss, theft and regulatory restrictions that may delay or make it impossible to transport the medication, as well as for the resulting consequences. In all cases, the sending of blood and blood derived products, products reserved for hospital use, or products requiring special storage conditions, especially refrigeration, and more generally products that are not available from dispensing chemists in France are excluded. Furthermore, the halt in the production of the medication, their withdrawal from the market, or their non-availability in France are cases of force majeure that can delay the cover or make it impossible.

3. ASSISTANCE IN THE EVENT OF THE THEFT, LOSS OR DESTRUCTION OF YOUR IDENTITY DOCUMENTS OR MEANS OF PAYMENT

During your trip, you lose your identity documents, or they are stolen. Every day, from 8 am to 7:30 pm (French time) except on Sundays and bank holidays, by calling our Information Department, we will inform you of the formalities to complete (complaint, identity document renewal, etc.).

This information covers documentary information as defined by article 66-1 of the amended French 31/12/71 Act. It can never be considered to be a legal consultation. Depending on the cases, we will direct you to organisations or professionals who are likely to be able to answer you. We cannot, under any circumstances, be held liable for the interpretation or use you may make of the information provided.

In the event of the loss or theft of your means of payment, credit or debit cards, cheque books, and subject to a certificate of loss or theft issued by the local authorities, we will advance you funds **up to the amount indicated in the Table of Coverage Amounts** so that you can pay your first necessities, subject to the following prior conditions:

- either the payment of the corresponding amount by a third party by debit or credit card,
- or the payment of the corresponding amount by your bank.

You will sign a receipt when the funds are handed over to you.

4. SEARCH AND RESCUE COSTS

SEA SEARCH AND RESCUE COSTS

We pay for sea search and rescue costs **up to the amount indicated in the Table of Coverage Amounts**.

Only costs invoiced by a company authorised to carry out this activity can be refunded.

The service does not include the organisation or the carrying out of search and rescue operations.

5. EARLY RETURN FOLLOWING AN INCIDENT AT YOUR RESIDENCE

Following an incident at your Residence, you are informed that your presence on site is essential to carry out formalities: we will organise and pay for your return travel by train in 1st class or by plane in economy class, from your trip location to your Residence as well as, when applicable, taxi costs from your trip location to the station or airport and, on arrival, from the station/airport to your Residence. If you fail to send us documentary proof (insurance claim, expertise report, copy of a complaint, etc.) within a maximum of 30 days, we reserve the right to invoice you for the full covered costs.

AFTER THE TRIP

1. ASSISTANCE ON RETURN TO YOUR RESIDENCE FOLLOWING REPATRIATION (IN FRANCE ONLY)

This cover is only available if all the following conditions are met:

- you have been the subject of transport/repatriation in the context of the services described in the "TRANSPORT/REPATRIATION" section,
- and on your return, following this transport/repatriation, you are either admitted to the hospital for a duration of more than 5 days, or immobilised in your residence for a duration of more than 5 days.

The Hospitalization or Immobilization must be consecutive to the transport/repatriation.

Prior to the implementation of this cover, you undertake to supply us all the supporting documents for your claim, on request by us:

- certificate of admission to hospital in France,
- medical certificate proving immobilization in your Residence.

Failure to send the supporting documents will entitle us to refuse to apply the cover.

A. HOME HEALTH AIDE ASSISTANCE

You are unexpectedly admitted to hospital for at least 5 days following an illness or an Accident that occurred during your trip. We will pay the costs of a home help at your Residence, either from the moment you return from hospital, or on the date you are admitted to the hospital to help the persons remaining at your residence, **up to the ceiling indicated in the Table of Coverage Amounts**. Working hours are distributed at your convenience during the month following your admission to hospital or your return home (Maximum of 2 hours at a time).

If you fail to send us documentary proof (admission documents from the hospital), we reserve the right to invoice you for the full covered costs.

B. CARE TAKER

We will pay for up to 20 hours a qualified care taker for the beneficiary and/or one of their ascendants at either of their homes with a minimum of 2 consecutive hours per day and at a maximum of 30 € per hour.

C. CHILD MINDER

During your stay in the hospital, or if a medical doctor orders you to remain in your Residence for more than 5 days following an Accident that occurred during the trip, on submission of supporting documents, we will refund you the child minding service **up to the amount indicated in the Table of Coverage Amounts**.

D. PET CARE

You are unexpectedly admitted to hospital for at least 5 days following an illness or an Accident that occurred during your trip. We will pay the cost of the transport of your pets (category 3 dog, or cat) and their accommodation costs in a suitable pet care establishment near your Residence or to the destination of your choice in France at less than 50 km from the hospital you are admitted to, **up to the amount indicated in the Table of Coverage Amounts**, for a maximum of one month. This service is subject to compliance with transport, hosting and accommodation conditions defined by the pet care establishments (vaccinations up to date, possible deposit, etc.).

This service can only be provided if you, or a person you

have authorised, can be present for the selected contractor to collect the animals.

E. TEACHING SUPPORT

In the event of a repatriation, admission to hospital and/or immobilization at the Residence of an insured child for at least two weeks, on presentation of the supporting documentation, we will refund the lessons given to the child for up to 15 hours of lessons per week, for a maximum duration of 1 month.

WHAT ARE YOUR DUTIES IN THE EVENT OF A CLAIM?

Provide a copy of the service contract between the parents and the tutor or the company that employs the tutor.

WHAT WE EXCLUDE (COMMON EXCLUSIONS FOR THE ASSISTANCE)

We can never be a substitute for local emergency services.

In addition to the general exclusions to the contract contained in the "What are the general exclusions applicable to the contract?" paragraph in the "CONTRACT FRAMEWORK" section, the following are excluded:

- the consequences of the exposure to infectious biological agents released intentionally or accidentally, to chemical agents of the combat gas type, to incapacitating agents, to neurotoxic agents or agents with residual neurotoxic effects,
- the consequences of your deliberate actions or the consequences of fraudulent acts, suicide attempts or suicides,
- pre-existing illnesses and/or injuries that have been diagnosed and/or treated by continuous hospitalisation, day hospitalisation or outpatient hospitalisation during the 6 months prior to the request, whether the event is the appearance or the deterioration of the said condition,
- costs incurred without our agreement, or not explicitly defined by these contractual general terms and conditions,
- expenses not proven by original documents,
- claims occurring in countries that are excluded from the cover or outside the contract's validity period, and especially beyond the duration of the planned trip to a Foreign country,
- the consequences of incidents occurring during motor sport events, races or competitions (or their heats), subject to prior authorisation from public authorities under applicable regulations if you participate as a competitor, or during trials on circuits subject to prior approval by public authorities, even if you are using your own vehicle,
- trips undertaken in order to obtain a diagnosis and/or medical treatment, or plastic surgery, their consequences and the resulting costs,
- the organisation and payment of the transport defined in the "TRANSPORT REPATRIATION" section for benign disorders that can be treated on site and that do not prevent you from continuing your trip,
- requests for assistance covering medically assisted procreation or abortions, their consequences and their resulting costs,
- requests relative to surrogate procreation or childbearing, its consequences and the resulting costs,
- medical devices and prostheses (dental, hearing, medical),
- spa treatments, their consequences and their resulting costs,

- medical costs incurred in your country of Residence,
- scheduled admissions to hospital, their consequences and their resulting costs,
- optician costs (spectacles and contact lenses for example),
- vaccines and vaccination costs,
- medical check-ups, their consequences and their associated costs,
- plastic surgery on aesthetic grounds, as well as their eventual consequences and their resulting costs,
- stays in a rest home, their consequences and their resulting costs,
- re-education, kinesitherapy, chiropraxis, their consequences and resulting costs,
- medical or para-medical services and the purchase of products of which the therapeutic nature is not recognised by French legislation, and the associated costs,
- health assessments for the purpose of preventive screening, regular treatments or analyses, their consequences and the resulting costs,
- desert search and rescue costs,
- the organisation of search and rescue operations for person, in particular in the mountains, at sea or in deserts,
- excess luggage costs for air transport and the cost of transporting luggage when it cannot be transported with you,
- trip cancellation costs,
- restaurant costs,
- customs duties.

LUGGAGE AND PERSONAL EFFECTS

1. WHAT WE COVER

Within the limits indicated in the Table of Cover Amounts, we cover your luggage and personal effects, outside your Residence, your Seasonal rental or your Holiday home, for:

- theft,
- total or partial destruction,
- loss during transport by a transport company.

In the case of loss, damage or destruction occurring when the luggage is covered by transporter liability after it has been checked in, we only take action to cover the complement after compensation by the transport company.

2. LIMITED REFUNDS FOR CERTAIN ITEMS

For valuables, pearls, jewellery and worn watches, furs, and for any device used to reproduce sounds and/or images and their accessories, hunting firearms, portable computers and tablets (IPAD, PC), the refund value cannot be in excess of 50% of the covered insurance amount indicated in the Table of Coverage Amounts in all cases.

Furthermore, the items listed above are not covered for theft.

If you use a private car, coverage for theft applies on condition that the luggage and personal effects are in the vehicle's trunk which is locked and hidden from view. Only

theft by break-in is covered.

If the vehicle is parked on the public highway, the cover is only applicable between 7 am and 10 pm.

3. LATE BAGGAGE DELIVERY

If your personal luggage checked in with the company you travelled with is not delivered at your trip destination airport, and if it is delivered more than 24 hours late, on presentation of the supporting documents you will receive the compensation defined in the Table of Coverage Amounts, in order to participate in the refund of the costs you incurred purchasing items of first necessity (i.e. garments and toiletries required by the Policy holder to compensate for the temporary unavailability of their personal luggage).

This compensation cannot be combined with the main cover indicated in the Table of Coverage Amounts.

4. WHAT WE EXCLUDE

In addition to the general exclusions applicable to the contract featured in the "What are the general exclusions applicable to the contract?" paragraph in the "CONTRACT FRAMEWORK" section, the following are excluded:

- the theft of luggage, personal objects and effects left unsupervised in a public place, or stored in a room available for the shared use of several people,
- mislaid, lost (except by a transport company), exchanged luggage,
- theft not regularly witnessed and reported by an authority (police, transport company, purser, etc.),
- theft by your staff during the performance of their jobs,
- accidental damage caused by leakage of colouring or corrosive liquids or greases contained in your luggage,
- confiscation of property by the authorities (customs, police),
- damage caused by mites and/or rodents as well as cigarette burns or burns from a non-incandescent heat source,
- theft from a convertible and/or estate or other type of vehicle without a trunk; the cover still applies on condition that the luggage cover delivered with the vehicle is used,
- sales representative collections and samples,
- the theft, loss, mislaying or deterioration of cash, documents, books, passports, identity documents, travel tickets and debit or credit cards,
- jewellery theft when it has not been placed in a locked safe or is not worn,
- the breaking of fragile items such as porcelain, glass, ivory, pottery or marble objects,
- indirect damage such as loss of value and loss of use,
- laptops and tablets when checked in with the transporter
- the items listed hereafter: any prosthesis, any type of orthotics, bicycles, trailers, bonds and shares, paintings, spectacles, contact lenses, keys of any type (except to the Residence), documents recorded on tapes or films as well as professional equipment, mobile phones, smartphones, drones, CDs, DVDs, GPS, sports equipment, musical instruments, foodstuffs, lighters, pens, cigarettes, alcohol, works of art, fishing rods, beauty products, photographic films and items purchased during your trip.

5. WHAT IS THE AMOUNT OF OUR COVER?

The amount indicated in the table of coverage is the maximum refund possible for each of the Claims during the covered period.

A relative Excess indicated in the Table of Coverage Amounts will be deducted per Claim.

6. HOW IS YOUR COMPENSATION CALCULATED?

You will receive compensation on the basis of the replacement value by equivalent objects of the same kind, after deduction for Wear and Tear and Obsolescence.

Purchase date	% of the purchase price paid
< 1 year	75 %
> 1 year et < 2 years	65 %
>2 years et < 3 years	55 %
>3 years et < 4 years	45 %
> 4 years et < 5 years	35 %
> 5 years et < 6 years	25 %
> 6 years et < 7 years	15 %
> 7 years et < 8 years	5 %
> 8 years	X

The proportional rule defined in article L 121-5 of the French Insurance Code will never be applied.

7. WHICH DOCUMENTS ARE REQUIRED IN THE EVENT OF A CLAIM?

Your claim declaration must include the following elements:

- the receipt of a complaint or a declaration statement of theft made within 48 hours to an authority (police, transport company, purser, etc.) in the case of a theft or a loss,
- The common carrier's reserved forms (sea, air, rail or road) when your luggage or objects were lost while in the legal custody of the common carrier
- Boarding pass confirmation of the luggage checked in by the common carrier and the proof of the late delivery.

In a case of failure to provide these supporting documents, we are entitled to demand an indemnity equal to the prejudice we have suffered.

The coverage amounts cannot be considered to be the proof of the property's value you are requesting compensation for, nor proof of the existence of this property.

You have a duty to use all means at your disposal and any documents in your possession to prove the existence and value of this property at the time of the Claim event, as well as to prove the extent of the damage.

8. WHAT HAPPENS IF YOU RECOVER ALL OR PARTS OF THE STOLEN OBJECTS COVERED BY LUGGAGE COVER?

You must notify us of the fact immediately by registered letter as soon as you are informed.

- If we are still to pay the compensation, you must take possession of the objects, in which case we will only cover the cost of damaged or missing items.
- If we have already paid you compensation, you have 15 days to choose:

- either the abandonment

- or to recover the objects by returning the compensation minus the cost of damage and missing objects.

If you have not decided within 15 days, we shall consider that you have chosen the abandonment.

PERSONAL TRAVEL ACCIDENT COVER

1. WHAT WE COVER

We cover the payment of all compensation defined in the **Table of Coverage Amounts** in the case of an accident with physical injury to the Policy holder during the duration of the trip.

2. WHAT IS THE AMOUNT OF OUR COVER?

Our cover is for the amount indicated in the **Table of Coverage Amounts** in the following cases:

FOR POLICY HOLDERS OF LEGAL AGE:

- Death: the lump sum indicated in the **Table of Coverage Amounts** is payable to the beneficiaries you named in the Special Terms and Conditions or, to your heirs in case on non-indication.
- Permanent partial disability: you will receive a lump sum of which the amount will be calculated by **applying the amount indicated in the Table of coverage amounts** for permanent total disability, your partial permanent disability rates, determined using the schedule featured below.

Please note that only disabilities in excess of 10% will be compensated under this contract.

FOR POLICY HOLDERS WHO ARE MINORS:

- Death of a child: we refund funeral costs incurred **within the limits of the amount** defined in the **Table of Coverage Amounts**, on presentation of the original invoice from the funeral home,
- Disability of a child: you will receive a lump sum of which the amount will be calculated by **applying the amount indicated in the Table of coverage amounts** for permanent total disability, the partial permanent disability rate for the Policy holder's child, determined using the schedule featured below.

3. DISABILITY SCHEDULE

COMPLETE LOSS:	RIGHT	LEFT
Arm	70%	60%
Forearm or hand	60%	50%
Thumb	20%	17%
Index finger	12%	10%
Middle finger	6%	5%
Ring finger	5%	4%
Little finger	4%	3%
Thigh	55%	
Leg	40%	
Limbs	100%	
Foot	40%	

Big toe	8%
Other toes	3%
Both eyes	100%
Visual acuity or one eye	25%
Full, incurable deafness that cannot benefit from a hearing aid	60%
Full, incurable deafness that cannot benefit from a hearing aid in one ear	10%
Complete and incurable insanity	100%

COMBINED COMPENSATION:

Death and permanent disability cover cannot be combined when they are the results of a single covered event.

If, after having received compensation resulting from partial disability consecutive to a Covered event, you were to die from the consequences of the same Event, we will pay your beneficiaries the lump sum within the **limits of the amount indicated in the Table of coverage amounts** minus the compensation that we have already paid you for permanent partial disability.

4. DEFINITION OF LOSS

By loss, we mean the complete amputation or full paralysis of the limb in question or the ankylosis of all the joints.

5. WHAT WE EXCLUDE

In addition to the general exclusions applicable to the contract featured in the "What are the general exclusions applicable to the contract?" paragraph in the "CONTRACT FRAMEWORK" section, the following are excluded:

- accidents caused by: blindness, paralysis, mental disorders, as well as all illnesses or infirmities existing when this contract was subscribed to,
- accidents resulting from the practise of certain sports such as: rock-climbing, mountaineering, luge competitions, underwater diving with or without autonomous breathing equipment, parachuting and all air sports, including kite flying and flying similar devices, pot-holing, as well as those resulting from training for, or participating in sports competitions,
- accidents caused by a transport company not licensed for public transport.

6. HOW IS COMPENSATION CALCULATED?

The compensation amount can only be defined after consolidation, i.e. once the consequences of the Accident have stabilised.

The final rate following an Accident impacting a limb or organ that was already damaged will be equal to the difference between the rate determined by the table and its application terms and conditions, and the rate existing before the Accident.

If you are the victim of a disability that is not featured in the "Disability Schedule" above, we will determine the corresponding disability rate by comparing its seriousness to those of the cases defined in the said table, without it being possible to take into account the victim's professional activity

to determine the seriousness of the disability.

If it is medically established that the Policy holder is left-handed, the disability rate defined for the upper right-hand limb is applicable to the upper left-hand limb, and vice versa.

If the Accident is the cause of several injuries, the disability rate used to calculate the amount we will pay will be calculated by applying the rate in the above schedule used to determine the disability rate in the event of a workplace accident without it being possible for the overall disability rate to be in excess of 100 %.

The application of the above schedule supposes in all cases that the consequences of the Accident have not been aggravated by the action of a previous illness or disability, and that the victim had undergone suitable medical treatment. If this were not the case, the rate would be determined taking into account the consequences the Accident would have had on a person in normal physical condition who underwent rational treatment.

7. WHAT ARE YOUR DUTIES IN THE EVENT OF A CLAIM?

Your claim declaration must include the following elements:

- a medical certificate,
- the statements of any possible witnesses proving the existence or the magnitude of the Accident.

During their treatment period, Policy holders must allow the medical consultant we assign to the case free access to their medical file so that they can assess the consequences of the Accident.

In the event of a disagreement as to the causes or consequences of the Accident, we shall submit the disagreement to 2 experts, one chosen by the Policy holder or their beneficiaries and the other by ourselves, subject to our respective rights.

In the event of a disagreement, a 3rd expert will be appointed, either by common agreement, or by the President of the Court of First Instance of your place of Residence.



THIRD-PARTY LIABILITY

1. THIRD-PARTY LIABILITY IN A FOREIGN COUNTRY: WHAT WE COVER

The financial consequences you may suffer following an amiable compositor or a legal claim brought against you by a third party due to any physical injury or damage to property caused to them by an accident, fire or explosion that occurred during your trip, **within the limits of the amounts indicated in the Table of Coverage Amounts.**

2. RENTAL CIVIL LIABILITY IN A FOREIGN COUNTRY: WHAT WE COVER

The financial consequences you may suffer as the tenant of a property (apartment, house) due to any damage caused to a third party through water damage, fire or explosion occurring on the premises temporarily occupied during the Stay, **within the limits of the maximum amounts indicated in the Table of Coverage Amounts.**

The coverage applies under the following conditions:

- when you have caused damage to a Third party for which you are civilly liable through a claim,
- and when the damaging event occurred between the initial date of effect of the cover and its termination or expiry date, whatever the dates of the other elements

composing the Claim.

This amount is the limit of the Insurer's commitment for all damage caused by the same initial cause, whatever the number of third parties in question.

3. WHAT WE EXCLUDE

In addition to the general exclusions applicable to the contract featured in the "What are the general exclusions applicable to the contract?" paragraph in the "CONTRACT FRAMEWORK" section, the following are excluded:

- damage that you have caused intentionally as a physical person or as a legal or de facto director of a company if you are a legal entity,
- damage resulting from the use of motor vehicles, or all aircraft, sea or river craft, or from the practise of air sports,
- damage occurring to any motorised land vehicle or to any air, river or sea craft,
- damage resulting from hunting,
- damage resulting from any professional activity,
- the consequences of any property claim, or injury claim suffered by you, your spouse, your ascendants or descendants,
- Collateral damage except when the consequences of covered property damage or physical injuries, in which case the cover is as shown within the limit indicated in the Table of Coverage Amounts,
- all measures taken at your own initiative without our prior agreement,
- The physical damage caused by the Policy holder to laptops, mobile phones and tablets.
- Damage to goods that are in the custody of, rented to or lent to the Policy holder (this exclusion does not apply to Third Party Liability for rentals in a foreign country)

4. TRANSACTION – ACKNOWLEDGEMENT OF LIABILITY

We cannot be liable for any acknowledgement of liability or any transaction that you may have accepted without our consent. However, the acknowledgement of the existence of the facts is not considered to be an acknowledgement of liability, no more than the fact of having provided urgent care to a victim when it is an act of assistance that everyone has the right to provide.

5. PROCEDURE

If legal proceedings are brought against you, we will provide your defence and will direct the proceedings for the facts and damage within the scope of the cover provided by this contract.

However, you can associate yourself to our proceedings if you can prove a specific interest that is not covered by this contract.

The fact of providing your defence as a security cannot be construed as an acknowledgement of cover and does not in any way imply that we accept to cover any damage not covered by this contract.

In this case, we nevertheless retain the right to bring proceedings against you for the payment of any sums paid or deposited by us on your behalf.

6. PROCEEDINGS

In the matter of type of proceedings:

- before the civil, commercial or administrative courts, we are free to exercise this right within the framework of this contract's cover,
- before criminal courts, proceedings can only be brought with your permission,
- if the dispute only concerns civil interests, your refusal to agree to the use of the envisaged proceedings generates our entitlement to claim compensation from you equal to the resulting prejudice for us.

You cannot oppose our bringing proceedings against a liable Third party if they are covered by another insurance contract.

7. UNOPPOSABLE FORFEITURE

Even if you fail in your duties following a Claim, we have a duty to compensate the persons you are liable to.

In this case, we nevertheless retain the right to bring proceedings against you for the payment of any sums paid or deposited by us on your behalf.

8. COURT COSTS

We cover court costs and fees and other settlement costs. However, if the ruling against you is for an amount that is higher than the cover amount, each one of us will pay these costs proportionally to the respective share in the ruling.

MISSED CONNECTION

1. WHAT WE COVER

This cover is valid for:

- regular outbound or round-trip airline flights of which the timetables have been published,
- outbound charter flights of which the timetable is indicated on the outbound plane ticket.

Following the late arrival of the Policy holder's flight under all the following conditions:

- for technical or atmospheric reasons,
- more than 6 hours later than the initially scheduled time,
- leading to a missed connection,

we will refund you the costs of meals, refreshments and/or accommodation at the connection and/or transfer location **up to the amount indicated in the Table of Coverage Amounts.**

To calculate the compensation, the number of hours the outbound flight was delayed for are not added to the number of hours the return flight was delayed for; they only cover a one-way trip. However, the cover can apply to the regular outbound flight and the regular return flight if there is a delay of more than 6 hours on both flights.

This cover does not apply if you were transferred to another airline within the originally planned timetable.

The cover takes effect on the date and time indicated on the plane ticket and expires on arrival at the destination airport.

2. WHAT WE EXCLUDE

In addition to the general exclusions applicable to the contract featured in the "WHAT ARE THE GENERAL EXCLUSIONS APPLICABLE TO THE CONTRACT?" paragraph in the "CONTRACT FRAMEWORK" section, we cannot take action under the circumstances defined below:

- civil or foreign wars, riots, popular uprisings, strikes, acts of terrorism, hostage-taking or sabotage, any manifestation of radioactivity, all effects of a nuclear origin or caused by a source of radiation in the departure, transit and destination country,
- any event that jeopardises the safety of your travel if your destination is on the list of countries the French European and Foreign Ministry advises against travelling to,
- a decision of the airport authorities, civil aviation authorities or any other authority announced 24 hours before the departure date for your travel,
- events that occur between the date your trip was booked and the date this contract was subscribed to,
- missing the flight for which you had a confirmed booking, for any reason,
- refused access on board following the failure to respect the luggage check-in time limit and/or failure to arrive at the boarding gate.

3. WHAT ARE YOUR DUTIES IN THE EVENT OF A CLAIM?

You must:

- fill in a declaration of lateness or have one stamped by a competent person from the airline on which you are travelling or by a competent member of airport staff,
- as soon as you return and at the latest within the 15 following days, you must send us the completed declaration of lateness, a photocopy of your plane ticket, the invoice for the covered ticket and the boarding card stub.

TRIP INTERRUPTION COSTS

1. WHAT WE COVER

We will refund the trip costs subscribed with the trip organizer Subscriber to the contract that have been paid but not used up **to the amounts given in the Table of Coverage**, proportional to the duration (**not including transport**), starting from the day after the event that caused your early return in the following cases:

- following your transport/medical repatriation organised by us under the terms and conditions defined in the "TRANSPORT/REPATRIATION" paragraph,
- if a family member (your spouse or partner, or one of your or your partner's ascendants or descendants) is admitted to hospital (**unplanned hospitalization**) or dies, or if one of your brothers or sisters dies and you must interrupt your trip due to this,

2. WHAT IS THE AMOUNT OF OUR COVER?

The amount is proportional to the number of trip days not used. The indemnity is refunded within **the limits indicated in the Table of coverage per person**, without ever exceeding the maximum per Event. To determine the compensation, the administration fees, visa fees, insurance fees, tips and refunds or compensation granted by the trip organizer Subscriber to the contract will be deducted.

This cover cannot be combined with the "Compensatory trip" cover.

3. WHAT WE EXCLUDE

In addition to the exclusions defined in the general terms and conditions, interruptions consecutive the following

are not covered:

- Aesthetic treatments, a spa, an abortion, in vitro fertilisation and its consequences;
- A psychic or mental or depressive disorder without hospitalization of less than three days;
- Epidemics.

DELAYED FLIGHT

1. WHAT WE COVER

This cover is valid for:

- regular outbound or round-trip airline flights of which the timetables have been published,
- outbound charter flights of which the timetable is indicated on the outbound plane ticket.

Following the late arrival of the Policy holder's flight:

- by more than 4 hours after the initially scheduled time, for regular outbound and/or return flights,
- by more than 6 hours after the initially scheduled time, for outbound charter flights,

we will pay you lump sum compensation, **up to the amount indicated in the Table of Coverage Amounts**.

To calculate the compensation, the number of hours the outbound flight was delayed for are not added to the number of hours the return flight was delayed for, they only cover a one-way trip. However, the cover can apply to the regular outbound flight and the regular return flight if there is a delay of more than 4 hours on both flights.

This cover does not apply if you were transferred to another airline within the originally planned timetable.

The cover takes effect on the date and time indicated on the plane ticket and expires on arrival at the destination airport.

2. WHAT WE EXCLUDE

In addition to the general exclusions applicable to the contract featured in the "What are the general exclusions applicable to the contract?" paragraph in the "CONTRACT FRAMEWORK" section, we cannot take action under the circumstances defined below:

- civil or foreign wars, riots, popular uprisings, strikes, acts of terrorism, hostage-taking or sabotage, any manifestation of radioactivity, all effects of a nuclear origin or caused by a source of radiation in the departure, transit and destination country,
- any event that jeopardises the safety of your travel if your destination is on the list of countries the French European and Foreign Ministry advises against travelling to,
- a decision of the airport authorities, civil aviation authorities or any other authority announced 24 hours before the departure date for your travel,
- events that occur between the date your trip was booked and the date this contract was subscribed to,
- missing the flight for which you had a confirmed booking, for any reason,
- Refused access on board following the failure to respect the luggage check-in time limit and/or failure to arrive at the boarding gate.

3. WHAT ARE YOUR DUTIES IN THE EVENT OF A CLAIM?

You must:

- fill in a declaration of lateness or have one stamped by a competent person from the airline on which you are travelling or by a competent member of airport staff,
- as soon as you return and at the latest within the 15 following days, you must send us the completed declaration of lateness, a photocopy of your plane ticket, the invoice for the covered ticket and the boarding card stub.

RETURN IMPOSSIBLE

1. TYPE OF COVER

The purpose of this cover is to compensate your accommodation, meal and items of first necessity costs within the limits **indicated in the Table of Coverage Amounts** remaining at your expense in situations that meet the conditions described below.

2. COVER CONDITIONS

The "RETURN IMPOSSIBLE" COVERAGE covers the absolute impossibility for you to leave your stay location on the date initially scheduled for your return, for reasons that are characteristic of force majeure and meeting all the following conditions:

- they must be outside of your control, unknown and unforeseeable at the time of your departure,
- independent of yourself, in particular unrelated to your state of health, such as the Policy holder's illness or injury,
- independent of the failure of the organisations in charge of your return journey (tour operator, travel agent, airline, etc.) and/or of the contractors these organisations use in the organisation of the travel or in compliance with their legal duties towards you,
- independent of a strike by the above-mentioned organisations in charge of the Policy holder's trip.

The cover is for extended stays directly or indirectly consecutive to a Natural disaster or a Terrorist attack, by waiver of the general terms and conditions of this contract.

When making the Claim, you must prove that all the above conditions are met.

3. EXTENT OF THE COVER

We will refund actual accommodation costs (hotel, meals and items of first necessity) within the following limits:

- the amount **indicated in the Table of Coverage Amounts**,
- as long as it is absolutely impossible for you to leave your stay location,
- up to a maximum of 5 consecutive nights.

The amounts will be refunded when you submit the original supporting documents for the costs incurred (invoices) and the travel ticket for the initially scheduled return as well as the original invoice for the travel.

SPORTS AND LEISURE COVER

DEFINITION OF SPORTS AND LEISURE ACTIVITIES

Any practise of a sport or leisure activity as an amateur during a trip of which the type and duration are indicated in the "WHAT SORT OF TRIPS ARE COVERED?" section.

The following are not considered to be sports or leisure activities:

- all events, competitions or courses, whether amateur or professional, organised by a sports organisation, association or federation,
- any training for one or more sports events or competitions.

1. MOUNTAIN SEARCH AND RESCUE COSTS

MOUNTAIN SEARCH AND RESCUE COSTS

We pay for mountain search and rescue costs (including for off-piste skiing) **up to the amount indicated in the Table of Coverage Amounts.**

Only costs invoiced by a company authorised to carry out this activity can be refunded.

RESCUE COSTS FROM MARKED TRACKS

If you have an Accident while skiing on marked, tracks we pay for the rescue costs from the location of the Accident to the nearest medical centre without limit to the amount.

Only costs invoiced by a company authorised authorized to carry out this activity can be refunded.

The service does not include the organization or the carrying out of search and rescue operations.

2. INTERRUPTION OF SPORTS AND LEISURE ACTIVITIES (REFUND OF SKI PASSES AND SKI LESSONS FOLLOWING AN ACCIDENT)

A. WHAT WE COVER

We refund you, **up to the amount indicated in the Table of Coverage Amounts**, the cost of ski passes, and ski lessons paid for but not used (transport not included) proportional to their use, when you are forced to interrupt these activities for one of the following reasons:

- transport/repatriation as defined in these General terms and Conditions,
- a sporting accident which, according to a medical doctor, prohibits the practise of the activity, and on presentation of a detailed medical certificate,

Special case of mountain skiing: ski passes, ski lessons and equipment hire paid by you during your stay are considered to be a single activity cost.

B. WHAT IS THE AMOUNT OF OUR COVER?

The compensation is:

- proportional to the number of days on the ski pass or of ski lessons that were not used,
- due from the day after the complete halt of covered activities,
- calculated based on the total price per person for the activities, supported by the original invoices, and **up to the amount indicated in the Table of Coverage Amounts.**

The calculation of the compensation does not include administrative fees, visa and insurance costs, gratuities, as well as refunds or compensation awarded by the organisation from which you purchased your activities.

3. ACCIDENTAL DAMAGE TO SPORTS EQUIPMENT (REFUND OF RENTAL COSTS FOLLOWING THE BREAKAGE OF PERSONAL OR RENTED SKIS)

If you break your personal or rented skis, on presentation of original supporting documents, we will refund the cost of the rental of an equivalent pair of skis, **up to the maximum amount indicated in the Table of Coverage Amounts.**

This refund will be made on presentation of the following supporting documents:

- if your skis are broken: the purchase invoice for your skis and the ski rental invoice,
- if rented skis are broken: the initial rental invoice for the broken skis as well as the rental invoice for the replacement skis.

4. SPORTS AND LEISURE CIVIL LIABILITY

A. WHAT WE COVER

The financial consequences you may suffer following an amiable or legal claim against you by a third party due to any physical injury or damage to property, or resulting tangible or intangible damage, caused to them during your sports or leisure Activities, **within the limits of the maximum amounts indicated in the Table of Coverage Amounts.**

You are covered when practising your sports or leisure Activity, during your trip, subject to this activity not being covered by another insurance policy.

The coverage applies under the following conditions:

- when you have caused damage to a Third party for which you are civilly liable through a claim,
- and when the damaging event occurred between the initial date of effect of the cover and its termination or expiry date, whatever the dates of the other elements composing the Claim.

B. WHAT WE EXCLUDE

In addition to the exclusions contained in the "WHAT ARE THE GENERAL EXCLUSIONS APPLICABLE TO THE CONTRACT?" paragraph in the "CONTRACT FRAMEWORK" section, the following are excluded:

- damage that you have caused intentionally as a physical person or as a legal or de facto director of a company if you are a legal entity,
- damage resulting from the use of motor vehicles, or all aircraft, sea or river craft, or from the practise of air sports,
- damage occurring to any motorised land vehicle or to any air, river or sea craft,
- damage resulting from hunting,
- damage resulting from any professional activity,
- the consequences of any property claim, or injury claim suffered by you, your spouse, your ascendants or descendants,
- intangible damage except when the consequences of covered property damage or physical injuries, in which case the cover is as shown within the limit indicated in the Table of Coverage Amounts,
- all measures taken at your own initiative without our prior agreement,
- accidents resulting from the practise of the following sports: bob-sleigh, rock climbing, skeleton, mountain climbing, competitive sledge riding, all aerial sports, as well as those resulting from the participation in or training for matches or competitions,
- fines or any pecuniary sentences given as a sanction and which are not the direct compensation for a physical injury or damage to property.

C. TRANSACTION – ACKNOWLEDGEMENT OF LIABILITY

We cannot be liable for any acknowledgement of liability or any transaction that you may have accepted without our consent. However, the acknowledgement of the existence of the facts is not considered to be an acknowledgement of liability, no more than the fact of having provided urgent care to a victim when it is an act of assistance that everyone has the right to provide.

D. PROCEDURE

If legal proceedings are brought against you, we will provide your defence and will direct the proceedings for the facts and damage within the scope of the cover provided by this contract.

However, you can associate yourself to our proceedings if you can prove a specific interest that is not covered by this contract.

The fact of providing your defence as a security cannot be construed as an acknowledgement of cover and does not in any way imply that we accept to cover any damage not covered by this contract.

In this case, we nevertheless retain the right to bring proceedings against you for the payment of any sums paid or deposited by us on your behalf.

E. PROCEEDINGS

In the matter of types of proceedings:

- before the civil, commercial or administrative courts, we are free to exercise this right within the framework of this contract's cover,
- before criminal courts, proceedings can only be brought with your permission,
- if the dispute only concerns civil interests, your refusal to agree to the use of the envisaged proceedings generates our entitlement to claim compensation from you equal to the resulting prejudice for us.

You cannot oppose our bringing proceedings against a liable third party if they are covered by another insurance contract.

F. UNOPPOSABLE FORFEITURE

Even if you fail in your duties following a Claim, we have a duty to compensate the persons you are liable to.

In this case, we nevertheless retain the right to bring proceedings against you for the payment of any sums paid or deposited by us on your behalf.

G. COURT COSTS

We cover court costs and fees and other settlement costs. However, if the ruling against you is for an amount that is higher than the cover amount, each one of us will pay these costs proportionally to their respective share in the ruling.

CONTRACT AGREEMENT

This contract is governed by French law.

1. EFFECTIVE DATE AND DURATION

The validity of all coverage corresponds to the travel dates indicated on the invoice issued by the trip organizer who had subscribed for a maximum of 90 days in a row. Except for the "Trip Cancellation" cover which takes effect on the day you subscribe to the contract and ceases on the day of your departure on the trip.

The insurance premium is not refundable.

2. RENOUNCEMENT FOR MULTIPLE COVERAGE

In compliance with article L112-10 of the French Insurance Code, the Policy holder who takes out an insurance policy for nonprofessional purposes who can prove an earlier cover for one of the risks covered by this new contract may renounce this new contract without incurring any fees or penalties, as long as it has not been fully performed or if the policy holder has not made use of any cover, within a deadline of fourteen calendar days starting from the signature of the new contract.

This renouncement is notified by letter or email to the following addresses:



Chapka

Customer service

31-35 rue de la Fédération

75717 Paris Cedex 15

France

(it is recommended to send by registered letter with acknowledgement of receipt)

The following model can be used:

Model of a renouncement letter: "Dear Sirs, I the undersigned (surname and first name) residing at (main residence) hereby inform you that I renounce to my subscription to the contract registered under reference XXX, on (date) for the following reason: At.....on..... Date and signature".

The insurer will refund the premium paid by the policy holder within thirty days of the date the right to renouncement is exercised, unless a claim under the contract occurs during the renouncement period.

3. HOW IS PROPERTY DAMAGE COVERED BY THE INSURANCE ASSESSED?

If the damage cannot be determined privately between the parties, it is assessed using amiable and mandatory expertise, on condition of our respective rights.

Each party chooses their own expert. If these experts cannot come to an agreement, they will call on a third expert, all three coming to a majority decision between them.

In the event of the failure by ourselves or yourself to appoint an expert, or if the 2 experts fail to come to an agreement on the choice of a 3rd expert, the appointment is made by the President of the court of first instance of the place where the Claim event occurred. This appointment is made by a simple request signed by at least one of us, the party who has not signed is summoned to the expertise by registered letter.

Each party pays their expert's costs and fees and, when applicable, half of the third expert's fees.

4. WHEN WILL I RECEIVE MY COMPENSATION?

Payment will be made within 5 days of the agreement between us or following an applicable court ruling.

5. WHAT ARE THE LIMITS IN THE EVENT OF FORCE MAJEURE OR OTHER EQUIVALENT EVENTS?

We can never be a substitute for local organisations in cases of emergency.

We cannot be held liable for failings or delays in the performance of services in the event of force majeure or events such as:

- civil or foreign wars, known political instability, popular uprisings, riots, terrorist acts, reprisals,
- recommendations from the W.H.O. or national or international authorities, or the restriction of the free movement of persons and property, for whatever grounds, and especially on health, security, weather-related grounds, the limitation or suspension of air traffic,
- strikes, explosions, natural disasters, the disintegration of an atomic core or any radiation from a radioactive energy source,
- delays in and/or the impossibility of obtaining administrative documents such as entry and exit visas, passports, etc., required for your transport inside or outside the country you are in, or on your entry to the country recommended by our medical doctors for admission to hospital,
- the use of local public services or agents we must use under local and/or international regulations,
- the non-existence or unavailability of technical or human resources suitable for transport (including a refusal to act).

6. EXCEPTIONAL CIRCUMSTANCES

Passenger transporters (especially airlines) may impose restrictions on people suffering from certain pathologies or on pregnant women, that apply up to the moment the transport begins, and which are likely to be changed without notice (for airlines: medical examination, medical certificate, etc.).

As a consequence, persons will only be repatriated on condition that the transporter does not refuse the transport and, of course, on condition that there is no unfavourable medical opinion (as defined and under the procedures in section 3.2.1.1. "Transport / repatriation") with regards to the health of the Policy holder or the unborn child.

7. WHAT ARE THE GENERAL EXCLUSIONS APPLICABLE TO THE CONTRACT?

The contract's general exclusions are those common to all the insurance cover and assistance services described in these General terms and conditions. Are excluded:

- civil or foreign wars, riots, popular uprisings,
- the deliberate participation of a Policy holder in riots, strikes, brawls or assault and battery,
- the consequences of the disintegration of an atomic core or any radiation from a radioactive energy source,
- unless waived, an earthquake, volcanic eruption, tidal wave, flood or natural disaster except in the framework of the French N° 82-600 Act of 13th July 1982 covering the compensation of the victims of natural disasters (for insurance cover),
- the consequences of the use of medication, drugs, narcotics and assimilated products not available by prescription, and of the abuse of alcohol,
- any deliberate act by you that may trigger the coverage under this contract,
- accidents resulting from the practise of the following sports: bob-sleigh, rock climbing, skeleton, mountain climbing, competitive sledge riding, all aerial sports, as well as those resulting from the participation in or training for matches or competitions,
- accidents caused by the use of a motorcycle of over 125 cc both as driver or passenger,

8. SUBROGATION

After having committed costs in the framework of our insurance

coverage and/or assistance services, except those paid under the "Personal travel accident" cover, we are subrogated in the rights and proceedings that you may be entitled to against third parties liable for the Claim, in compliance with article L 121-12 of the French Insurance Code.

Our subrogation is limited to the amount of costs we have engaged in the performance of this contract.

9. WHAT ARE THE STATUTES OF LIMITATION?

ARTICLE L 114-1 OF THE FRENCH INSURANCE CODE:

All proceedings resulting from an insurance contract have a statute of limitations of two years from the date of the event. However, this deadline only applies:

1° In the event of non-disclosure, omission, false or incorrect declaration about the risk, from the date the Insurer discovered it.

2° In the event of a Claim, only from the date the interested parties discovered it if they prove that they had no prior knowledge until that date. When proceedings by the policy holder against the Insurer are due to third party proceedings, the statute of limitations only begins to run starting on the date the third party initiated legal proceedings against the policy holder or was compensated by them.

ARTICLE L 114-2 OF THE FRENCH INSURANCE CODE:

The statute of limitations is interrupted by any of the ordinary causes of interruption, and by the appointment of experts following a claim. The interruption of the statute of limitations for the proceedings can, amongst other things, result from the sending of a registered letter with acknowledgement of receipt sent by the insurer to the policy holder concerning premium payment proceedings, and by the policy holder to the insurer covering the payment of compensation.

ARTICLE L 114-3 OF THE FRENCH INSURANCE CODE:

By derogation to article 2254 of the French Civil Code, the parties to the insurance contract cannot, even by mutual agreement, either change the duration of the statute of limitations, nor add to the terms to suspend or interrupt it.

The ordinary causes of the interruption of the statute of limitations are defined in articles 2440 to 2246 of the French Civil Code: the recognition by the debtor of the right they were claiming the statute of limitations against (article 2240 of the French Civil Code), legal proceedings (articles 2241 to 2243 of the French Civil Code), a forced performance (articles 2244 to 226 of the French Civil Code).

10. COMPLAINTS - DISPUTES

If you have a complaint or disagreement, you can contact:



Chapka

Claims department
31-35 rue de la Fédération
75717 Paris Cedex 15
France

If the processing time is in excess of ten working days, a letter informing you of the delay will be sent to you within this period. You will be sent a written answer to your complaint within a maximum of two months from the date the initial complaint was received.

If you have subscribed to your contract through an intermediary, and if your request falls under their duty to provide advice or information, or if it concerns the sales terms and conditions for your contract, your claim must only be sent to the intermediary.

If the disagreement persists after the processing of your request by our Customer Feedback Department, you can apply to the Ombudsman by writing to:



La Médiation de l'Assurance

TSA 50110

75441 Paris Cedex 09 - France

<http://www.mediation-assurance.org/>

You have the right to initiate proceedings in the competent jurisdiction at all times.

11. INSPECTION AUTHORITY

The authority in charge of inspection is the "Autorité de Contrôle Prudentiel et de Résolution" - A.C.P.R. - 4 place de Budapest – CS 92459 – 75436 PARIS cedex 09.

12. DATA PRIVACY

EUROP ASSISTANCE, a company governed by the French Insurance Code, with its registered office at 1, promenade de la Bonnette - 92633 Gennevilliers Cedex (France) (hereinafter the "Insurer"), acting as the person in charge of processing, processes the Policy holder's personal data in order to:

- manage assistance and insurance requests,
- organise customer satisfaction surveys of Policy holders who have benefited from its assistance and insurance services,
- to draw up sales statistics and actuarial studies,
- to examine, accept, check and monitor risk,
- to manage potential litigation and implement legal measures,
- to implement monitoring duties in the context of money laundering and the financing of terrorism, asset freezing measures, the fight against the financing of terrorism, including the triggering of alerts and declarations of suspicion,
- to implement the measures against insurance fraud,
- to manage the recording of phone conversations with the Insurer's employees or those of its subcontractors for the purpose of training and assessing employees and improving the quality of service, as well as to manage potential disputes.

The Policy holder is informed of and accepts that their personal data be processed for specific purposes. This processing is carried out under the terms of the contract.

The collected data is mandatory. If this data is not communicated, it will be more difficult, or even impossible, to manage the Policy holder's requests for insurance or assistance.

To this effect, Policy holders are informed that their personal data is for use by the Insurer, in charge of processing, and the Insurer's subcontractors, subsidiaries and agents. In order to fulfil its legal and regulatory duties, the Insurer may communicate data to the legally authorised administrative or judicial authorities.

Policy holders' personal data is kept for a variable amount of time depending on the use (6 months for phone recordings, 10 years for medically-related processing, 5 years for other processing), increased by the mandatory retention periods for accounting purposes and the legal duration of the statute of limitations.

Policy holders are informed and accept that their personal data be communicated to recipients in third countries outside the European Union that have equivalent protection. Data transfers to these third countries are governed by:

- a cross-border flow agreement drawn up in compliance with standard contractual manager-to-subcontractor clauses

issued by the European Union and currently applicable.

- the subscription contracts of Insurer entities to internal conditions compliant with recommendation 1/2007 of the Article 29 Work group on the standard request to approve constraining company rules for the transfer of personal data.

- a cross-border flow agreement drawn up in compliance with the currently applicable Privacy Shield for data transfers to the United States.

Policy holders may request a copy of the appropriate guarantees covering data transfer from one or other of the addresses indicated below.

The purpose of these flows is to manage assistance and insurance requests. The following categories of data are covered:

- identity related data (in particular: surname, first name, gender, age, date of birth, phone number, email address) and privacy related data (in particular: family situation, number of children),
- location data,
- health data, including the social security number (NIR).

Policy holders, as persons concerned by the processing, are informed that they have a right of access, correction, deletion and portability of their data, as well as a right to limit its processing. They also have a right to oppose. Policy holders have the right to withdraw their consent at all times, without having an impact on the validity of the processing based on consent before it was withdrawn. Furthermore, they have a right to draw up specific and general directives as to the preservation, deletion and communication of their data after their death.

Policy holders may exercise their rights by contacting the Data protection delegate by letter accompanied by the photocopy of a signed identity document to one or other of the following addresses:

- or by email: protectiondesdonnees@europ-assistance.fr,
- or by post: EUROP ASSISTANCE - À l'attention du Délégué à la protection des données - 1, promenade de la Bonnette - 92633 Gennevilliers Cedex (France).

Finally, Policy holders are informed that they have the right to file a complaint with the Commission Nationale Informatique et Libertés (French Data Privacy Watchdog).

13. RIGHT OF CONSUMERS TO REFUSE COLD CALLING

EUROP ASSISTANCE FRANCE hereby informs Policy holders, in compliance with the French 17th March 2014 Act n° 2014-344, that if they do not wish to be the subject of sales prospecting by phone by a professional with which they have no pre-existing contractual relationship, they can register free of charge on the register of people who reject phone prospecting by sending a letter or an email to:



SOCIETE OPPOSETEL

Service Bloctel

6, rue Nicolas Siret - 10 000 TROYES FRANCE

<http://www.bloctel.gouv.fr/>

COUNTRY LIST

ZONE 1: FRANCE

Continental France (FR)

Monaco (MC)

ZONE 2: EUROPE AND MEDITERRANEAN COUNTRIES

(excluding DROM-TOM, Canary Islands, Azores, The Asian part of Russia)

Albania (AL)

Andorra (AD)

Austria (AT)

Balearic Islands (XA)

Belgium (BE)

Belarus (BY)

Bosnia Herzegovina (BA)

Bulgaria (BG)

Continental France (FR)

Continental Portugal (PT)

Continental Spain (ES)

Croatia (HR)

Cyprus (CY)

Czech Republic (CZ) - (see also Czech Republic)

Czech, Republic (CZ)

Denmark (except Greenland) (DK)

England (see United Kingdom)

Estonia (EE)

Finland (FI)

Georgia (GE)

Germany (DE)

Gibraltar (GI)

Greece (GR)

Hungary (HU)

Ireland (IE)

Israel (IL)

Italy (IT)

Jordan (JO)

Latvia (LV)

Liechtenstein (LI)

Lithuania (LT)

Luxembourg (LU)

Macedonia (MK)

Madeira (XC)

Malta (MT)

Morocco (MA)

Moldavia (MD)

Monaco (MC)

Montenegro (ME)

Netherlands (NL)

Norway (NO) Palestinian Territories (PS)

Palestinian Territories (PS)

Poland (PL)

Romania (RO)

Russia, Federation (European part including up to the Urals) (RU)

San-Marino (SM)

Scotland (see. United Kingdom)

Serbia (RS)

Slovakia (SK)

Slovenia (SI)

Sweden (SE)

Switzerland (CH)

Tunisia (TN)

Turkey (TR)

United Kingdom (GB)

Ukraine (UA)

Vatican, City State (Holy Seat) (VA)

ZONE 3: ENTIRE WORLD

Except for the countries that are excluded in the framework of the application of the "WHAT IS THE CONTRACTUAL GEOGRAPHICAL COVERAGE?" section.



Aon France trading under the trademark Chapka Assurances.

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Register N°: 414 572 248 | European Union VAT N°: FR 22 414 572 248

Financial guarantee and civil liability insurance in accordance with sections L.512-7 and L.512-6 of the French Insurance Code.