



CAP EUROPA

CONTRACT IB1800340FRFO1

europ
assistance
*you live we care**

* Vous vivez, nous veillons

COVER

AMOUNTS

REPATRIATION ASSISTANCE	
Repatriation or medical transport	Actual costs
Accompaniment during the repatriation or transport	Ticket
Presence in the event of hospitalisation	Ticket
Extended hotel stay	Hotel expenses of €80 per day, for a maximum of 10 days
Hotel expenses	Hotel expenses of €80 per day, for a maximum of 10 days
Additional reimbursement of medical, surgical, pharmaceutical, and hospitalization expenses abroad and Advance of medical expenses	According to chosen packages : €30,000 per person, maximum of €150,000 per event €50,000 per person, maximum of €250,000 per event €70,000 per person, maximum of €350,000 per event
Excess per medical expenses claim	€0
Emergency dental care	€150
Transport of the corpse in the event of death <ul style="list-style-type: none"> • Repatriation of the body • Funeral expenses necessary for the transport • Return of family members or of an insured accompanier • Death formalities 	Actual costs €2,000 Ticket Tick for a member of the family + hotel expenses of €80 per day, for a maximum of 2 nights
Early return	Ticket
Payment of search or rescue expenses (in the mountains, on marked ski runs or paths ("pistes") only)	€4,000 per person €8,000 per event
Return of children aged under 15 years	Ticket
Sickness or accident of one of your children of minor age or disabled	Transport expenses
Advance of funds abroad	€1,500
Forwarding messages abroad	Actual costs
Continuation of your business assignment	Transport expenses
Legal assistance abroad <ul style="list-style-type: none"> • Payment of fees • Advance of bail bond 	€1,500 €7,500



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CIVIL LIABILITY

Bodily injury, property damage and consequential losses	€4,500,000
Only material and consequential losses	€75,000
Excess per claim file	€100

COVER STARTS

Assistance: on the scheduled day of departure – at the place to report to indicated by the organizer

For other cover: on the scheduled day of departure – at the place to report to that is indicated by the organizer

EXPIRY OF THE COVER

Assistance: on the scheduled day of return (at the place where the group disperses)

For other cover: on the scheduled day of return (at the place where the group disperses)