



CAP SCHENGEN

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)