



CONTRACTS INFORMATION NOTICE
No. MGENIB1100265SAN
& No. 6058



**CONTRACT INFORMATION NOTICE - "SEJOUR HOME ABROAD
No. MGENIB1100265SAN & No. 6058"**

FOR ANY EXPLANATION OF YOUR CONTRACT

KINOUSASSUR

**17 Avenue Jeanne d'Arc
94110 ARCEUIL**

From Monday to Friday – From 9 a.m to 12 p.m and 2 p.m to 6 p.m

- **By phone from France: 01.49.85.82.20** (*call not surcharged, cost according to operator, and may be recorded*)
- **By phone from abroad: + 33.1.49.85.82.20** (*call not surcharged, cost according to operator, and may be recorded*)
- **By e-mail: info@kinousassur.com**

HOW TO CONTACT OUR ASSISTANCE SERVICE

VYV INTERNATIONAL ASSISTANCE

**3 passage de la corvette – 17000 La Rochelle
7 days a week – 24 hours a day**

- **by phone from France: 05.86.85.00.57** (*call not surcharged, cost according to operator, call may be recorded*)
- **by phone from abroad: + 33.5.86.85.00.57** (*call not surcharged, cost according to operator, call may be recorded*)
- **by e-mail: ops@vyv-ia.com**

To permit us to intervene under the best conditions, remember to prepare the following information that will be requested during your call:

- Your contract number,
- Your last and first names,
- Your home address,
- The country, city or town where you are at the time of the call,
- Specify the exact address (no., street, hotel, etc.),
- The phone number where we can reach you,
- The nature of your problem.

FOR REIMBURSEMENT OF YOUR MEDICAL EXPENSES (excluding hospitalisation)

GAPI- TRAVEL ZEN SERVICE

ZA Actiburo – 99, rue Parmentier – 59650 VILLENEUVE D'ASCQ

Monday through Friday from 9:00 a.m. to 12:30 p.m. and from 1:30 p.m. to 5:00 p.m.

- **by phone from France: 03.74.45.43.05** (*call not surcharged, cost according to operator, call may be recorded*)
- **by phone from abroad: +33.3.74.45.43.05** (*call not surcharged, cost according to operator, call may be recorded*)
- **by e-mail: medical@gapigestion.com**

To benefit from the reimbursement of your medical expenses (which did not result in hospitalisation), you will have to provide the ASSUR TRAVEL - GAPI management service with the following documents:

- Contract number,
- Bank Identification Data (only for the 1st request for reimbursement) or possible proxy,
- The medical claim form duly completed, signed and stamped, including any medical reports (hospitalisation reports, Specialists visits reports, medical examination reports),
- Original or digitized medical prescriptions,
- For any medical fees out of France:
 - for less than €500: original or digitized invoices for care that have been paid and corresponding proofs of payments,
 - for more than €500: original invoices for care that have been paid and corresponding proofs of payments,
- For any medical fees in France: original treatment forms (CERFA documents) and/or medical invoices paid with their payment receipts or, failing this, the corresponding Social Security slips,
- Any other documents that the Insurer deems necessary.

For medical expenses of less than 500 €, you can scan the invoices and send them to us by email (keep the originals, they may be requested for verification by the Insurer).

HOW TO CONTACT OUR INSURANCE SERVICE

SERVICE TRAVEL ZEN- ASSUR TRAVEL

ZA Actiburo – 99, rue Parmentier – 59650 VILLENEUVE D'ASCQ

Monday through Friday from 9:00 a.m. to 12:30 p.m. and from 1:30 p.m. to 5:00 p.m.

- **by phone from France: 03.74.45.43.05** (*call not surcharged, cost according to operator, call may be recorded*)
- **by phone from abroad: +33.3.74.45.43.05** (*call not surcharged, cost according to operator, call may be recorded*)
- **by e-mail: travelzen@assur-travel.com**

Remember to gather the following information that will be requested during your call:

- Your contract number,
- Your last and first names,
- Your home address,
- The reason for your declaration.

Any declaration of incident must be the subject of a written statement.

TABLE OF GUARANTEES

INSURANCE GUARANTEES	GUARANTEE CEILING
FLIGHT DELAY (A)	
✓ Delay of 6 to 12 hours (A1)	€ 30 (A1)
✓ Delay of 12 to 18 hours (A2)	€ 60 (A2)
✓ Delay of 18 to 24 hours (A3)	€ 90 (A3)
✓ Delay of more than 24 hours (A4)	€ 120 (A4)
✓ Delay resulting from overbooking of the airline (A5)	€ 30 (A5)
✓ Missed connection (A6)	€ 60 (A6)
LUGGAGE (B)	
✓ In case of destruction, theft and loss (B1)	€ 1 530 (B1)
Including valuables	€ 150
Including laptops and mobile phones	€ 150
Including theft from inside a regular or converted vehicle	€ 500 per case
Deductible	€ 30 per person
✓ Late delivery (+ 24 hours (B2)	€ 90 per person (B2)
INTERRUPTION OF STUDIES (C)	
✓ Pro-rata refund of interruption fees	€ 230
INTERRUPTION OF STAY (D)	
✓ Ticket / Accommodation (D1)	€ 40 per day with a maximum of 500 (D1)
✓ Tuition fees (D2)	€ 40 per day with a maximum of 500 (D2)
MISSED DEPARTURE (E)	
✓ Missed departure	€ 500
DAMAGE TO POSSESSIONS OF SCHOOL AND HOST FAMILY (F)	
✓ Damage to possessions of school/family	€ 500 / Deductible € 100
INDIVIDUAL ACCIDENT (G)	
✓ Accidental death (G1)	€ 12 500 (G1)
✓ Total permanent infirmity following an accident (G2)	€ 12 500, <i>reducible in case of permanent partial disability according to the Social Security scale for Job-related Accidents for disability levels superior to 10%</i> (G2)

ASSISTANCE GUARANTEES	BENEFITS CEILING
REPATRIATION ASSISTANCE (H)	
<ul style="list-style-type: none"> ✓ Repatriation for health-related reasons (H1) ✓ Repatriation of 2 accompanying persons (H2) ✓ Visit of a loved one (H3) ✓ Extension of stay (H4) ✓ Early return (H5) ✓ Replacement escort (H6) 	<p>Real expenses (H1)</p> <p>Real expenses (H2)</p> <p>Round-trip transport ticket * + Hotel costs 42 € per night with a maximum of 10 nights (H3)</p> <p>Transport ticket* + Hotel costs 42 € per night with a maximum of 10 nights (H4)</p> <p>Round-trip transport ticket round trip * (H5)</p> <p>Round-trip transport ticket round trip* (H6)</p>
MEDICAL EXPENSES (I)	
<ul style="list-style-type: none"> ✓ Medical expenses outside country of residence (I1) <ul style="list-style-type: none"> - Emergency dental care - Dental care due to accident - Alternative therapies ✓ Medical expenses in case of temporary return of the Insured to his country of residence (duration of cover 30 days maximum) (I2) <ul style="list-style-type: none"> - Emergency dental care ✓ Telemedicine 	<p>200 000 € per event (I1)</p> <p>150 € per person</p> <p>350 € per person</p> <p>3 sessions and € 50 per session</p> <p>15 000 € per event (I2)</p> <p>60 € per person</p> <p>Included</p>
DEATH ASSISTANCE (J)	
<ul style="list-style-type: none"> ✓ Repatriation of remains (J1) ✓ Funeral expenses necessary for transport (J2) ✓ Formalities of death (J3) 	<p>Real expenses (J1)</p> <p>Real expenses (J2)</p> <p>Round-trip transport ticket* + Hotel costs 80 € per night with a maximum of 8 nights (J3)</p>
ASSISTANCE IN CASE OF EPIDEMIC OR PANDEMIC (K)	
<ul style="list-style-type: none"> ✓ Accommodation fees in case of quarantine (K1) ✓ Psychological support following quarantine (K2) ✓ Impossible Planned return (K3) ✓ Support for a local phone plan (K4) ✓ Psychological support following repatriation (K5) 	<p>€ 80 per night for 14 nights per person (K1)</p> <p>6 interviews per event (K2)</p> <p>Accommodation fees: € 80 per night for 5 nights per person + extension of guarantees for 6 days if necessary (K3)</p> <p>Up to € 80 (K4)</p> <p>6 interviews per event (K5)</p>
UNEXPECTED ASSISTANCE (L)	
<ul style="list-style-type: none"> ✓ Sending medication abroad (L1) 	<p>Expense for expedition (L1)</p>
ADDITIONAL SERVICES (M)	
<ul style="list-style-type: none"> ✓ General information before the trip (M1) ✓ Transmission of urgent messages, translation service (M2) 	<p>Included (M1)</p> <p>Included (M2)</p>
WINTER AND RISK SPORTS (N)	
<ul style="list-style-type: none"> ✓ Coverage under the contract in case of occurrence of a guaranteed event during the practice of a winter and risk sport as defined in the section "DEFINITIONS COMMON TO ALL GUARANTEES" of this Contract. (N) 	<p>Covers (N)</p>

* by train 1st class or airplane economy class.

GENERAL PROVISIONS OF THE CONTRACT

You are covered under this Contract in the event of a Guaranteed Event occurring during the practice of a Winter Sport or Risk Sport as defined under "DEFINITIONS COMMON TO ALL GUARANTEES" of this Contract.

Note: "Dangerous Sports" as defined under "DEFINITIONS COMMON TO ALL GUARANTEES" of this Contract are never covered by this Contract. Please read the General Exclusions of your Contract carefully.

DEFINITIONS COMMON TO ALL GUARANTEES

The terms defined below have the following meanings between the parties (except for a definition that is specific to a cover):

Abroad

The entire world, except for the country of the Insured's domicile and the excluded countries.

Alternative therapies

Osteopathy, acupuncture, homeopathy, phytotherapy, massage therapist

Assistance company

The Assistance provider appointed by the Insurer: VYV International Assistance. The Insurer mandates VYV International Assistance to provide the assistance and evacuation services.

Attack/Act of terrorism

Any act of violence that constitutes a criminal or illegal attack against persons and/or properties in the country in which they stay, the purpose of which is to seriously disrupt public order through intimidation and terror, and which is covered by the media.

Any such "attack" must be so designated by the Ministry of Foreign affairs or the Ministry of Interior.

If several attacks occur in the same day and same country, and if the authorities deem them to constitute a single coordinated action, such events are deemed to constitute a single event.

Bodily injury accident

Brutal alteration of health originating from a sudden action caused by an event that is beyond the victim's control, as established by a competent medical authority, which entails the delivery of a medication prescription for the victim.

Calculation of the age

Member's age is calculated by deducting the year of their birth from the current civil year.

Ceiling of guarantees

Maximum amount covered under the contract for a period of a maximum 12 consecutive months after the effective date

Closing of airport

Total or partial closing of the airport of departure or destination that prevents the Insured from leaving or returning to his country of residence for more than 24 consecutive hours in the context of a trip.

Competent medical authority

A medical professional graduated from a medicine school appearing on the list of the World Health Organization (WHO) and authorized to practice in the country where medical care is provided.

Contract currency

The contract is issued in Euro. The claims are converted at the date of treatment using the exchange rate published by the Banque of France applicable at the date of treatment.

Claims can be reimbursed in the local Currency:

- to the Insured, the eventual currency exchange risk being borne by the Insured,
- to the Health care provider, the eventual currency exchange risk being borne by the Insurer.

Converted vehicle

Any vehicle customized to contain living quarters with at least one bed for a private use only

Country of residence

Country in which you spend time abroad. This country is necessarily different from your country of origin

Country of origin

Country where your domicile is located.

Domicile

The location of the Insured's principal and regular residence is deemed to be his domicile, as stipulated in the application form. In the event of a dispute, the Insured's domicile with respect to taxation is his principal and regular residence.

Emergency dental treatment

Cover of emergency dental treatments (dental wound dressings, obturation, devitalisation, tooth extraction) consecutive to an accident or an unexpected illness requiring a surgery or a medical treatment, which could not wait for the return of the Insured to the country of origin.

Epidemic

Appearance of a large number of sick people in a given place as a result of an illness.

Essentials

Clothing and toiletries that enable you to temporarily cope with the unavailability of your belongings.

Europe

Europe including Russia up to the Urals, the islands and the countries around the Mediterranean Sea, the Canary Islands and the Azores.

Covered events during a covered trip

- ✓ Loss, theft and destruction of luggage,
- ✓ Flight delay,
- ✓ Civil liability and private life abroad,
- ✓ Accidental death,
- ✓ Total or partial permanent disability following an accident,
- ✓ Interruption of studies,
- ✓ Interruption of stay,
- ✓ Missed departure
- ✓ Illness, injury or death of the insured during his Stay,
- ✓ Hospitalisation or death of a Family Member in the Home Country of the Insured,
- ✓ Property damage at the Domicile or business premises of the Insured during his Stay.

Excess

The part of the claim that the contract specifies is charged to the Insured in the event of indemnification following an Incident. This excess can also be expressed in duration or percentage.

Family members

Your spouse or common-law partner, or any person with whom you have concluded a civil partnership; your ancestors or descendants up to the 2nd degree or those of your spouse; and your fathers-in-law, mothers-in-law, brothers and sisters, including the children of the spouse or cohabitee of one of your direct ancestors, sisters-in-law, sons-in-law, daughters-in-law, or those of your spouse. They must reside in the same country as you, unless otherwise contractually stipulated.

Incident

Aleatory incident of such a nature as to trigger coverage of this contract when this latter is in force

Insurance Code / French Mutual Insurance Companies Code

Compendium of legislation and regulations governing insurance contracts.

Insurer

Health and assistance guarantees (contract n° MGENIB1100265SAN):

MGEN, 3 square Max-Hymans – 75 748 PARIS Cedex 15, France, registered under number SIREN 775 685 399, and governed by both the stipulations and the provisions of the French Mutual Insurance Companies Code,

Insurance guarantees (contract n°6058):

MUTUAIDE ASSISTANCE – 126, rue de la Piazza – 93196 Noisy le Grand Cedex – S.A., a limited liability corporation with fully paid-in capital of € 12 558 240, governed by the Insurance Code, registered under number 383 974 086 Bobigny – VAT N° 31 3 974 086 000 19.

Hereafter designed by the term “we”

Insured Person

A natural person or group of natural persons duly insured under this contract, hereinafter referred to as « You». The person must be under 75 years of age upon the subscription to this Contract.

Invalidation

Any frauds, forgeries or false declarations or testimony that might put the covers specified in the contract into play, resulting in invalidation of our commitments and loss of the rights specified in said contract.

Luggage

Travel bags, suitcases, chests, and the contents thereof, except for the clothes that you are wearing.

Material Damage

Any damage to or destruction of an item or substance. Any physical harm done to an animal.

Maximum amount by event

If coverage is exercised for a number of persons who are the victims of the same event and are insured by this contract, the Insurer’s coverage is limited to the maximum amount that is specified for said coverage regardless of the number of victims. Then, the indemnifications are reduced and paid in proportion to the number of victims.

Medical practice in effect

Designates a medical treatment that is customarily used to treat a disease in compliance with the generally accepted ethical standards, apart from experimental treatments, clinical tests and medical research.

Natural disaster

Abnormal intensity of a natural agent not caused by human activity, such as an earthquake, volcanic eruption, tidal wave, flood or natural disaster caused by the abnormal intensity of a natural agent recognized as such by the public authorities.

Orthopaedic or orthotic devices

Anatomic parts or devices used to temporarily or permanently prevent or replace body deformations (crutches, neck brace, wheelchair, etc.).

Pandemic

Global spread of disease.

Period of insurance

The period of this contract’s validity as defined in the « EFFECTIVE DATE AND DURATION OF THE CONTRACT » rubric.

Provision of benefits in case of Assistance, Evacuation and hospitalisation

The benefits covered under this contract are triggered only with the Insurer’s prior agreement. Consequently, any expenses that the Insured incurs under his own authority will not be reimbursed by the Insurer.

Quarantine:

Strict isolation of an individual in case of a suspected or confirmed case of disease, ordered by local authorities, to avoid the spreading of the said disease in the event of an epidemic or pandemic.

Relative

A member of your family or any natural person that you or one of your successors-in-interest designates, who resides in the same country as you.

Serious illness

Abrupt and unforeseeable alteration of health, established by a competent medical authority, which may quickly generate an important aggravation of the health of the victim if appropriate care are not provided or which can be life threatening and implies the cessation of all occupational or other activity.

Spinal fixation apparatuses

Pieces or parts of metal (or other apparatuses) used for assembling broken bones or consolidating articulations through surgery.

Stay

A stay or trip limited to 12 consecutive months.

Subrogation

The legal situation by which the rights of a person are transferred to another person (in particular, replacement of the Insured by the Insurer for legal proceedings against the opposing party).

Third party

Any natural person or legal entity, except for the insured person, relatives as defined hereinabove, the persons accompanying the insured person, his/her servants, whether or not employees, during the carrying out of their responsibilities, the employers or the authorized persons.

Unexpected illness

Designates any sudden and unforeseeable alteration of health established by a competent medical authority that requires a rapid medical response.

Valuable objects

Jewellery, watches, clocks, photo graphic equipment and cameras, articles in gold, silver or precious metals, carpets, silk, tape recorders, record players, CD players, CDs, DVD and mp3 players, electric and electronic equipment, mobile and satellite telephone, computers, scientific instruments and materials, optical instruments such as telescopes, sports equipment, surfboards, tools, hunting articles, weapons and all types of ammunition.

Traditional sports: COVERED Activities

Any sport not listed as a Winter Sport, Risk Sport or Dangerous Sport (or excluded).

Winter sports and risk sports: COVERED Activities

Snow or ice sports except those mentioned in Dangerous Sports (in case of off-trail, coverage is only granted if the Insured is accompanied by a qualified guide legally authorised to practice in the domain considered skiable); rappel climbing; mountain-climbing up to 6500 meters; speleology; Off-road mountain biking and on landscaped path; canyoning; canoeing in white water; rafting; water skiing; kite surfing; American football; rugby; horseback riding, diving up to 40 meters, sailing water sports, helicopter flights and hot air balloon rides.

Dangerous Sports: Activities NOT COVERED

Combat and self-defence sports; any sport requiring the use of a weapon, whether on fire or not; mountain expedition beyond 6500 meters; deep-water diving (more than 40 meters), solo sailing or beyond territorial waters, ski jumping, climbing without ropes, all vehicles involving a motorised land vehicle, all sports involving an aircraft (airplane, glider, delta , ULM), skydiving and freefall, any professional or semi-professional sports activity, motorised water sports and private training for participation in a competition organised by an official sports body.

We organize

We take the necessary steps to give you access to the service.

We take care of

We finance the service.

GEOGRAPHICAL EXTENT OF THE CONTRACT

The guarantees subscribed under this Contract apply worldwide (unless specifically excluded in the Special Conditions).

Attention, Insured persons are only covered in their Country of Residence except for a duration of 30 consecutive days and provided that they return abroad at the end of this period.

Are also excluded the countries at civil or foreign war, at known political instability, which are experiencing popular, movements, riots, terrorist attacks, reprisals, restriction on the free circulation of goods and persons (whatever the reason, in particular sanitary, security, meteorological reasons).

PAYMENT OF THE PREMIUM

The premium, including imposts, fees and taxes in effect for this category of contract, is payable by the subscriber of the Contract in cash prior to coverage of the risk.

In the absence of payment before the beginning of the risk, the Contract will be considered null and void and will not result in any compensation.

EFFECTIVE DATE AND DURATION OF THE CONTRACT

Subject to payment of the premium, the guarantees are valid for the period indicated on the application form. The guarantees begin to apply:

- For the "MISSED DEPARTURE" guarantee: upon purchase or reservation of the Stay. The guarantee expires upon departure, or upon remittance of the keys in case of rental.
- For the other guarantees of the Contract, from the time that you leave your Home to go to the destination of your trip and end upon your return to your Home or on the term date of this Contract, whichever occurs first.

The effective date and duration of the guarantees under the Contract must correspond to the actual dates of your Stay. The Contract will be automatically extended without additional charges if you cannot complete your Stay on the scheduled date due to illness or accident, and this extension ceases as soon as you can return to your Home, and is only valid for up to 30 days. This extension is only valid if, before starting your trip, you have purchased a return ticket.

Note: This Contract is subscribed for minimum of one week for a maximum of 12 months. However, before expiration of the guarantee in progress, the Contract may be extended, under the same terms as those of the Initial Contract, subject to approval from the Insurer and full payment of the corresponding premium.

RIGHT OF WAIVER IN CASE OF REMOTE SUBSCRIPTION

Contract of duration less than 1 month

According to decree no. 2005-648 of 6 June 2005 relative to distance selling of financial services and article L.112-2-1-II-3 ° of the Insurance Code and article L221-18 of the French Mutual Insurance Companies Code, no right of waiver applies to travel or luggage insurance contracts of less than 1 month.

Contract of more than 1 month

The Insured has a right of waiver within 14 calendar days following the date of enrolment in the Contract, without any costs or penalties. This right does not apply if the Insured declares a covered loss to the Insurer during this 14-day period.

The waiver letter, a model of which is proposed below, must be sent by letter or any other durable medium to the Insurer or the Broker -KINOUSASSUR 17 AVENUE JEANNE D'ARC 94110 ARCUEIL.

Proposed letter for exercising your option of waiver

"I, the undersigned, Mr. / Ms. residing at renounce my subscription to Insurance Contract No. I declare that, as of the date of sending this letter, I am not aware of any Loss involving a guarantee of this Contract".

Consequences of the waiver

Exercising of the right of waiver within the period defined above results in termination of the Contract starting from the date of receipt of the request for waiver. The Insured is then reimbursed for the premium that he has paid, without charges or penalties, within 30 days from the date of exercise of his right of waiver, unless a Loss occurs prior to exercising of the right of waiver.

CALCULATION OF INDEMNITY

If the compensation cannot be determined by mutual agreement, it is determined by means of an amicable assessment, subject to our respective rights.

Each of us chooses an expert. If these experts do not manage to reach agreement, they call upon a third person and the three of them work together and vote by majority.

Should one of us fail to designate an expert or if the two experts do not agree on the choice of the third expert, the designation is made by the Presiding Judge at the Tribunal de Grande Instance ruling in urgent proceedings. Each takes responsibility for the expenses and fees of his expert and, if applicable, half of those for the third expert.

TIMEFRAME FOR INDEMNIFICATION

Payment will take place within a period of 15 days following the date that we reach agreement or following the date of the enforceable judicial decision.

FALSE DECLARATION

- **Involving the risk to be guaranteed**

Any reluctance or intentional misrepresentation and any omission or unintentional misrepresentation on your part concerning the risk to be guaranteed may be penalised under the conditions provided for by articles L.113-8 and L.113-9 of the Insurance Code and L.221-14 and L. 221-15 of the French Mutual Insurance Companies Code, taking into account the collective nature of the Contract.

- **At the time of the Loss**

Any fraud, unwillingness or intentional false declaration on your part regarding the circumstances or consequences of a Loss results in forfeiture of all benefits or indemnities for this Loss.

CONDITIONS OF EXAMINATION OF COMPLAINTS

1. In case of disagreement or discontent regarding the management of your request for reimbursement of medical fees, we invite you to send your complaint to the dedicated Department of GAPI, writing to qualite@gapigestion.com.

If you are not satisfied with the response provided to you, you may send a letter to:

**VYV INTERNATIONAL ASSISTANCE
ISICASSUR
3 Passage de la Corvette
17000 La Rochelle**

2. In case of disagreement or discontent regarding application of your contract, we invite you to send your complaint to VYV INTERNATIONAL ASSISTANCE, by calling +33 (0)5.86.85.00.40 (call not surcharged, cost according to operator, call may be recorded) or by writing to contact@vyv-ia.fr.

If you are not satisfied with the response provided to you, you may send a letter to:

**VYV INTERNATIONAL ASSISTANCE
ISICASSUR
3 Passage de la Corvette
17000 La Rochelle**

VYV INTERNATIONAL ASSISTANCE agrees to confirm receipt of your correspondence within a period of 10 business days. It will be processed within 2 months at most.

If the disagreement persists, you may refer the matter to the Insurance Mediator:

**LA MEDIATION DE L'ASSURANCE
TSA 50110
75441 PARIS CEDEX 09**

2. In case of disagreement or discontent regarding application of your contract, we invite you to send your complaint to ASSUR TRAVEL by calling +33.3.74.45.43.05 or by writing to travelzen@assur-travel.com.

If you are not satisfied with the response provided to you, you may send a letter to:

**MUTUAIDE ASSISTANCE
SERVICE ASSURANCE
TSA 20296
94368 BRY-SUR-MARNE CEDEX**

MUTUAIDE ASSISTANCE agrees to confirm receipt of your correspondence within a period of 10 business days. It will be processed within 2 months at most.

If the disagreement persists, you may refer the matter to the Insurance Mediator:

**LA MEDIATION DE L'ASSURANCE
TSA 50110
75441 PARIS CEDEX 09**

DATA COLLECTION

The Insured recognises being informed that the Insurer processes his personal information in accordance with regulations on the protection of personal information which are in effect and that, in addition:

- The answers to the questions asked are mandatory and that, in case of false statements or omissions, the consequences for him may be invalidity of his enrolment in the contract (article L 113-8 of the Insurance Code and article L221-14 of the French Mutual Insurance Companies Code) or a reduction of indemnifications (article L 113-9 of the Insurance Code and L221-15 of the French Mutual Insurance Companies Code).

- The processing of personal information is necessary for enrolment and execution of his contract and its guarantees, for management of the commercial and contractual relationships, and to satisfy legal, regulatory and administrative provisions in effect.

- The data collected and processed are kept for the duration necessary for fulfilment of the contract or the legal obligation. This data is then archived in accordance with the durations specified by provisions related to time limits.

- The recipients of the data concerning him are, within the limits of their duties, the services of the Insurer in charge of establishment, management and execution of the Insurance Contract and guarantees, its delegates, agents, partners, subcontractors and reinsurers, within the framework of carrying out their assignments.

They may also be sent to professional bodies as well as to all persons involved in the contract, such as lawyers, insurance adjusters, court officers and ministerial officers, guardians and investigators.

Information relating to him may also be sent to the Subscriber, as well as to all persons authorised as Authorised Third Parties (courts, arbitrators, mediators, relevant ministries, supervisory and supervisory authorities and any public bodies authorised to receive it as well as to the services in charge of control such as statutory auditors, auditors and departments in charge of internal control).

- As a financial institution, the Insurer is subject to legal obligations resulting mainly from the Monetary and Financial Code in the fight against money laundering and the financing of terrorism and, as such, it performs monitoring of contracts which could result in establishment of a declaration of suspicion or a measure of freezing of assets.

Data and documents relating to the Insured are retained for a period of five (5) years from the termination of the contract or termination of the relationship.

- Personal information may also be used as part of handling related to the fight against fraud which may result, if applicable, in placement on a list of people presenting a risk of fraud.

Placement on this list may have the effect of increasing the time necessary to examine his case, or of reduction or refusal of a right, benefit, contract or service.

Within this context, his personal information (or concerning the persons who are parties to or concerned by the contract) may be processed by any authorised person intervening within the entities of the Insurer Group in the fight against fraud. This information may also be sent to the authorised staff of organisations directly affected by fraud (other insurance organisations or intermediaries, judicial authorities, mediators, arbitrators, legal assistants, departmental officers, third-party organisations authorised by a legal provision and, where applicable). appropriate, victims of fraud or their representatives).

In the event of a fraud alert, the data is kept for a maximum of six (6) months to qualify the alert and then deleted, unless the alert is relevant. In the event of a relevant alert, the data are kept for up to five (5) years from the closing date of the fraud file, or until the end of the legal proceedings and of the applicable time limits.

For persons placed on a list of presumed fraudsters, the data concerning them are suppressed 5 years following the date of placement on this list.

- As an insurer, it is entitled to carry out data processing relating to offenses, convictions and security measures either at the time of the subscription to the contract, during the effective period of the contract, or within the framework of handling a dispute.

- Personal information may also be used by the Insurer within the framework of processing that it does for the purposes of research and development to improve the quality or relevance of its future insurance products and / or assistance and service offers.

- His personal information may be accessible to certain employees or service providers, located in countries outside the European Union.

- By providing proof of his identity, the Insured has the right to access, rectify, eliminate and object to the information processed. He also has the right to request to limit the use of his information when it is no longer needed, or to recover

the data he provided, in a structured format, when it is necessary for the contract or when he has approved use of this information.

He has a right to provide instructions regarding what will be done with his personal information after his death. These instructions, general or specific, concern retention, elimination and communication of his data after his demise.

The Insured may exercise those rights with the Insurer's Representative in charge of data protection:

The Insured person and/or beneficiaries have the right to access, rectify or erase data, limit the processing of their data, portability, opposition to treatments, as well as the right to define guidelines for their fate after their death. They can exercise their rights with the Data Protection Officer of the VYV Group: Tour Montparnasse - 33, avenue du Maine - BP 245 - 75755 Paris Cedex 15 or dpo@groupe-vyv.fr or dpo@vyv-ib.com. When exercising their rights, the production of an identity document may be requested. In case of persistent litigation, they have a right to seize the CNIL on www.cnil.fr or at 3, place de Fontenoy - TSA 80715 - 75334 Paris Cedex 7, France.

Data relating to the state of health of the insured persons, the treatment of which is necessary for the purposes of the performance of the obligations and the exercise of the rights proper to the insurer, or to the insured persons themselves, may be dealt with in the framework of the management and execution of the contract. These data are exclusively intended for the medical service of the Insurer. The exercise of rights is carried out by email for the attention of medical@vyv-ib.com.

After having made the request to the Data Protection Representative and not having obtained satisfaction, he has the possibility of referring the matter to the CNIL (Commission Nationale de l'informatique et des Libertés).

MULTIPLE INSURANCE POLICIES

In accordance with the provisions of Article L 121-4 of the French Insurance Code, when several insurance policies are established without fraud, each of them produces its effects within the limits of the guarantees of the contract, and in respect of the provisions of Article L 121-1 of the Insurance Code.

SUBROGATION

After having paid you an indemnity, we are subrogated in the rights and actions that you may have against the Third Parties responsible for the Loss, as provided for in Article L.121-12 of the French Insurance Code and article L224-9 of the French Mutual Insurance Companies Code.

Our subrogation is limited to the amount of compensation we paid to you or the services that we provided.

LIMITATION PERIOD

In keeping with article L 114-1 of the Insurance Code and article L221-11 of the French Mutual Insurance Companies Code, all actions resulting from the present contract are time-barred by two years starting from the causal event.

However, this timeframe does not apply:

- in case of hesitation, omission or false or inaccurate declaration about the risk incurred, starting from the day that the Insurer became aware of it;
- in case of a Loss if, on the day that the concerned parties became aware of it, if they prove that they were not aware up to that point.

When the action of the Insured against the Insurer results from the recourse of a third party, this time limit only starts to run from the day that this third party initiated legal action against the Insured or was indemnified by this latter party.

This time limit may be interrupted, in accordance with article L 114-2 of the Insurance Code Code and article L221-11 & L221-12 of the French Mutual Insurance Companies Code, by one of the following ordinary causes of interruption:

- recognition by the party owing the obligation that it was due to the party against whom the time limit expired (article 2240 of the Civil Code);
- a request in a court of law, even in urgent proceedings, until termination of the procedure. The same is true when it is brought before a court which is not competent or when the acts of referral of the matter to the court is annulled due to a procedural error (articles 2241 and 2242 of the Civil Code). The interruption is null and void if the petitioner withdraws his request or allows the procedure to expire, or if his request is definitively rejected (article 2243 of the Civil Code);

- a conservatory measure taken in application of the Code of Civil Procedures of Execution or an act of forced execution (article 2244 of the Civil Code).

It is reminded that:

Notification to one of the joint debtors about a petition to a court or about an act of forced execution, or recognition by the party owing the obligation that it was due to the party against whom the time limit expired, interrupts the time limit against all others, even against their heirs.

However, notification to one of the heirs of a joint debtor or recognition of this heir does not interrupt the time limit with regard to the other co-heirs, even in case of mortgage debt, if the obligation is divisible. This notification or recognition only interrupts the time limit, with regard to the other co-debtors, for the portion for which this heir responsible.

To interrupt the time limit for everyone, with respect to the other co-debtors, it is necessary for all the heirs of the deceased debtor to be notified, or for all these heirs to recognise the rights of the party to whom they are owed (article 2245 of the Civil Code).

Notification sent to the principal debtor or his recognition interrupts the time limit against the guarantor (article 2246 of the Civil Code).

The time limit may also be interrupted by:

- the designation of an expert following a Loss;
- mailing of a registered letter with confirmation of receipt (sent by the Insurer to the Insured concerning the action for payment of the premium, and sent by the Insured to the Insurer as concerns payment of the indemnity).

APPLICABLE LAW AND CONDITIONS OF SETTLEMENT IN CASE OF DISPUTE

This contract is exclusively governed by French law. Any dispute relating thereto, in the absence of amicable resolution, will come under the exclusive jurisdiction of the French courts.

REGULATORY AUTHORITY OF THE INSURER

The authority in charge of regulation of the Insurer is the Autorité de Contrôle Prudentiel et de Résolution (ACPR) – 4, place de Budapest – CS 92 459 – 75 436 Paris Cedex 9.

DESCRIPTION OF INSURANCE GUARANTEES

FLIGHT DELAY

1 / FLIGHT DELAYS

If your arrival has been delayed by 6 hours or more on a scheduled flight of airlines whose schedules are published, we will reimburse you within the limit of the amount indicated in the Table of Guarantees for the expenses left as your responsibility and which are the consequence of this delay (transport, accommodation, dining expenses). The indemnitees may be combined if the delay is related to the outbound flight or the inbound flight.

2 / FLIGHT DELAYS DUE TO OVERBOOKING BY THE AIRLINE

If the airline has sold more bookings than available seats on a scheduled flight and you cannot board due to this reason within a period of less than 6 hours, we will refund expenses for basic necessities left as your responsibility (those that are necessary while waiting for another flight transport, accommodation, meals), within the limits indicated in the Table of Guarantees and upon presentation of the original invoices.

3 / MISSED FLIGHT CONNECTIONS

In case a regular flight is delayed for more than 6 hours, due to a technical problem, weather, a natural disaster, intervention of the authorities, an act of terrorism (hostage-taking, hijacking...), we will refund your expenses for basic necessities (those that are necessary while waiting for another flight), within the limits indicated in the Table of Guarantees and upon presentation of the original invoices.

THE CONDITIONS OF GRANTING THE GUARANTEE

The guarantee is acquired provided you have taken the guaranteed flight or alternative flight or alternative flight.

WHAT ARE YOUR OBLIGATIONS IN CASE OF LOSS?

Under penalty of forfeiture, you are required to notify the Insurer and the travel supplier simultaneously within 5 days from the day you became aware of it.

You must:

- Have the flight delay observed by the airline with which you are traveling,
- Send us a list of costs incurred and the corresponding original invoices,
- Notify us by letter within 15 working days of returning to your home. After this period, we reserve the right to apply forfeiture of the guarantee.

This declaration must include: the name of the airport, the flight number, the day and time of arrival initially foreseen, the actual day and time of arrival, and **the reason for the delay**.

WHAT WE EXCLUDE

In addition to the exclusions appearing in the section "WHAT ARE THE GENERAL EXCLUSIONS APPLICABLE TO ALL OUR GUARANTEES", we may not become involved under the following circumstances:

- ◆ **the state of civil war or foreign war in the country of departure, transfer or arrival of the guaranteed flight,**
- ◆ **your refusal to board the flight initially specified by the authorised organisation,**
- ◆ **missing the flight on which your reservation was confirmed, regardless of the reason, non-admission onboard due to non-respect of the of the time limit for check-in, for you or for your baggage and/or of presentation for boarding,**

It is up to us to prove that the flight delay results from one of the events listed above, except for foreign war or, in application of the provisions of the French Insurance Code, is up to you to prove that the flight delay results from an event other than an act of foreign war.

LUGGAGE

We guarantee, to the limit of the amount indicated in the Table of Guarantees, your luggage, objects and personal effects, taken with you or purchased during the trip, away from your place of principal or secondary residence and tourist accommodation, in case of:

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

LATE DELIVERY OF BAGGAGE

If your personal baggage is not returned to you at the destination airport (outbound) and if it is returned to you more than 24 hours late, we will reimburse you for basic necessities, upon presentation of receipts and up to the amount indicated in the table of guarantee amounts.

Meanwhile, you may not combine this indemnity with the other indemnities of the BAGGAGE guarantee.

WHAT ARE THE LIMITS OF OUR GUARANTEE?

For Valuables, the repayment value cannot exceed the amount indicated in the Table of Guarantees.

For laptops and mobile phones, the compensation cannot under any circumstances exceed the limit indicated in the Table of Guarantees.

The objects listed above are only guaranteed against theft that has been demonstrated and duly declared as such to a competent authority (police, gendarmerie, transport company, purser, etc.).

- The theft of jewellery is ONLY guaranteed when it was placed in a lockbox or when worn by you.
- Theft of any sound and/or image reproduction equipment and their accessories is ONLY guaranteed when they were placed in a lockbox or when carried by you.

If you use an individual vehicle, the risks of theft are only covered if the baggage and personal effects are left in the locked trunk of the vehicle and out of sight. Theft by break-in is covered.

If the vehicle is parked on the public thoroughfare, the guarantee is only applicable between 7:00 a.m. and 10:00 p.m.

In all cases, if the theft occurred on board a vehicle, the compensation will be limited to the amount indicated in the Table of Guarantees.

WHAT WE EXCLUDE

In addition to the exclusions appearing in the section "WHAT ARE THE GENERAL EXCLUSIONS APPLICABLE TO ALL OUR GUARANTEES", we may not become involved under the following circumstances:

1) EXCLUDED CIRCUMSTANCES

- 2) The theft of luggage, personal objects and effects left unsupervised in a public place, hotel and youth hostel, or stored on premises shared by several people;**
 - ◆ The theft of any device for reproduction of sound and/or image and their accessories when they are not placed in a lockbox closed by key, when they are not carried, which de facto implies that these devices are not covered when there are entrusted to any transport company at all (air, sea, rail, road, etc.);
 - ◆ Forgotten, lost (except for by a transport company), exchange;
 - ◆ Theft without break-in, duly observed and written up by an authority (police, state police, transport company, purser, etc.);
 - ◆ Accidental damage due to the flow of liquids, oily, colorant or corrosive materials contained in your baggage;
 - ◆ Confiscation of property by the Authorities (customs, police);
 - ◆ Damage caused by mites and/or rodents as well as by cigarette burns or another source of non-incandescent heat;
 - ◆ damage due to wear, depreciation, mechanical or electrical defects, any cleaning, sanitising or repair process, atmospheric or climatological circumstances or any cause that occurs little by little,

- ◆ Theft committed in a convertible car and in any vehicle not having trunk;
- ◆ Collections, samples of sales representatives;
- ◆ Theft, loss, forgotten or damaged cash, documents, books, transport tickets and credit cards;
- ◆ Forgotten, lost or damaged official documents: passport, identity or residence card, vehicle registration card or driving license;
- ◆ The theft of jewellery when it is not placed in a lockbox closed by key, when it is not worn, which de facto implies that this jewellery is not covered when it is entrusted to any transport company at all (air, sea, rail, road, etc.);
- ◆ Broken fragile objects such as those made of porcelain, glass, ivory, pottery, marble,
- ◆ Theft at camping areas,
- ◆ Indirect losses such as depreciation and loss of enjoyment.

3) OBJECTS EXCLUDED

- ◆ Prostheses, devices of any kind, binoculars, glasses and contact lenses,
- ◆ DVDs, alarms, video games and accessories, furs, collections,
- ◆ bicycles, trailers, caravans and, in general, transport equipment,
- ◆ Titles of any kind, paintings, works of art, keys of any kind,
- ◆ Cash, documents recorded on tapes or film as well as professional equipment, musical instruments,
- ◆ Food products, lighters, pens, cigarettes, alcohols and cosmetics.

WHAT ARE THE EFFECTIVE DATE AND EXPIRATION DATE OF THE GUARANTEE?

The guarantee takes effect upon delivery or check-in of your luggage by the transporter or upon delivery of the keys for a rental.

It expires at the moment of definitive return of the luggage by the transporter, upon the return, or upon return of the keys for a rental.

WHAT AMOUNT DO WE COVER?

The amount indicated in the Table of Guarantees constitutes the maximum reimbursement, with application of the deductible, for all Losses occurring during the guarantee period.

HOW IS YOUR INDEMNITY CALCULATED?

In case of total or partial destruction, or in case of loss during transport by a transport company, you are indemnified with supporting documentation and based on the replacement value for equivalent objects of the same type, depreciation deducted.

During the first year and starting from the date of purchase, the amount reimbursed will be equal to the purchase value of the package or object of value. The following year, the amount of reimbursement will be calculated in the amount of 75% of the purchase price. In subsequent years, the value will be reduced by an additional 10%.

In case of theft, you are compensated based on supporting documents, after deducting the depreciation specified in the paragraph above.

Under no circumstances will a proportional rule will be applied in accordance with Article L.121-5 of the French Insurance Code.

Our reimbursement will be provided with a deduction for the eventual reimbursement obtained from the transport company and for the deductible.

WHAT ARE YOUR OBLIGATIONS IN CASE OF LOSS?

The declaration of Loss must be received by ASSUR TRAVEL within 5 business days (48 h in case of theft) unless there are unforeseen circumstances or force majeure; if this deadline is not respected and, as a result, we endure harm, you will lose any right to an indemnity.

The declaration of Loss will have to be accompanied by the following items:

- ✓ the receipt for filing of a complaint in case of theft or declaration of theft made to a competent authority (police, state police, transport company, purser...) when it involves the theft during the stay,

- ✓ the observation report on loss or destruction established with the transporter (sea, air, rail, road) when your baggage or objects are lost or damaged during the period when they are in the legal custody of the transporter,
- ✓ The certificate of irregularity in the event of loss or damage to baggage by the transporter,
- ✓ A copy of the list of objects declared damaged or stolen, given to the transporter,
- ✓ Original purchase invoices for damaged objects,
- ✓ The letter of reimbursement from the transporter showing the compensation paid to you.

In case these documents are not presented, you risk forfeiting your rights to indemnification.

The insured sums cannot be considered as proof of the value of the property for which you are claiming compensation, nor as proof of the existence of such property. You are required to justify, by all means in your power and by all documents in your possession, the existence and value of this property at the time of the loss, as well as the extent of the damage. If, as a justification, you knowingly use inaccurate documents or fraudulent means or make inaccurate or unreasonable statements, you will forfeit any right to compensation, without prejudice to any legal action we may then be entitled to take against you.

RECOURSE

Our guarantee is in addition to other guarantees granted elsewhere, and it is your responsibility to follow through with recourse to be taken with the Airline or any other organisation responsible for the loss.

You are required to take, first and foremost, measures to limit the damage and to have it observed by the competent authorities.

Baggage damaged during the trip, or not delivered by the transporter, must be the subject of a certificate of irregularity and a report drafted by the transporter before being accepted by you. If you discover the damage after delivery, you must notify the transporter, within three days, to establish a report and/or a complaint. In case of refusal to establish the report, you must provide notification of its protest within three days.

In addition, in the event of a theft committed in a motor vehicle, a report of the break-in will be drafted by the police authorities and must be provided to the Insurer.

WHAT HAPPENS IF YOU RECOVER ALL OR A PORTION OF YOUR LUGGAGE, OBJECTS OR PERSONAL EFFECTS?

You must immediately notify ASSUR TRAVEL by registered letter as soon as you are informed:

- if we have not paid the indemnity, you must take possession of said baggage, objects or personal effects; we will only be required to pay for eventual damage or missing items.
- if we have already indemnified you, within a period of 15 days, you may opt for:
 - ✓ either abandoning said baggage, objects or personal effects to us,
 - ✓ or taking back said baggage, objects or personal effects by returning the indemnity that you have received after deduction, if necessary, for the portion of this indemnity corresponding to the damage or missing items.

If you have not expressed a choice within a period of 15 days, we consider that you are opting for abandonment.

PRORATED REIMBURSEMENT OF FEES IN CASE OF INTERRUPTION

Following a break in school due to a Critical Illness or Severe Bodily Harm resulting in a discontinuation or disability of more than 12 (twelve) consecutive weeks, we will compensate you for tuition fees already paid and not consumed on a prorated basis up to the amount indicated in the Table of Guarantees.

Expenses that can be recovered by other means will not be reimbursed (secondary coverage).

WHAT WE EXCLUDE

In addition to the exclusions appearing in the section "WHAT ARE THE GENERAL EXCLUSIONS APPLICABLE TO ALL OUR GUARANTEES", we may not become involved under the following circumstances:

- ◆ A beauty treatment, spa treatment, voluntary termination of pregnancy, in vitro fertilisation and its consequences;
- ◆ Epidemics.

WHAT ARE YOUR OBLIGATIONS IN CASE OF LOSS?

You must send ASSUR TRAVEL all documents necessary for establishment of the file, and to prove the legitimacy and amount of the claim. In all cases, the originals of the detailed invoices showing the amount of tuition fees will be systematically requested.

Unless the information which is necessary for investigating the case is provided to our consulting physician, the case will not be able to be processed.

INTERRUPTION OF STAY

In the event of one of the circumstances mentioned below, we cover, up to the amounts indicated in the Table of Guarantees, non-refundable costs which are your responsibility (return ticket, accommodation costs, tuition fees):

- Interruption of travel in case of hospitalisation,
- Interruption of travel in case of absence from classes for medical reasons validated by the insurance doctor,
- Interruption of travel in case of repatriation or early return organised by an assistance company,
- Interruption of travel in case of a random event, which can be justified, making continuation of the stay impossible (By random event, we mean any unintentional circumstance on the part of the insured or a member of his family, unpredictable on the day of subscription and resulting from the sudden action of an external cause)
- Interruption of travel in the event of a riot, attack or act of terrorism provided that the following elements are cumulatively satisfied:
 - The event occurs during your Stay and results in property damage or bodily harm in the destination city/cities of the Insured Stay or within 100 kilometres of the resort,AND
 - The French ministry of foreign affairs advises that people avoid travel to the cities or destination of your stay,AND
 - No riots, attacks or acts of terrorism have occurred within the thirty days prior to booking of the insured stay.

WHAT ARE YOUR OBLIGATIONS IN CASE OF LOSS?

You must declare your loss to ASSUR TRAVEL as soon as the event causing the interruption of travel is brought to your attention.

In all cases, the originals of the detailed invoices showing the amount of return ticketing costs, accommodation costs and tuition fees will be systematically requested.

We will be exempt from the reimbursement of expenses or penalties accrued from the time that the event occurred if this is due to your late communication.

MISSED DEPARTURE

If you miss your transportation for your outbound trip, following an unforeseeable event beyond your control that may be justified, except in the case of a change of schedule due to the transporter, we will reimburse you for the purchase of a new ticket for the same destination, provided that you leave within 24 hours, within the limit of 100% of the total cost of the original ticket and within the limit indicated in the Table of Guarantees.

This guarantee is provided as long as you left a minimum margin of 2 hours before the deadline for check-in.

Under no circumstances may the amount be greater than that which would result from cancellation of the trip.

WHAT ARE YOUR OBLIGATIONS IN CASE OF LOSS?

You must declare your loss to ASSUR TRAVEL within 5 working days and provide all the supporting documents that are requested of you.

WHAT WE EXCLUDE

The MISSED DEPARTURE guarantee does not cover the impossibility of leaving related to material organisation, conditions of accommodation or of security of the destination.

In addition to the exclusions appearing in the section "WHAT ARE THE GENERAL EXCLUSIONS APPLICABLE TO ALL OUR GUARANTEES", we may not become involved under the following circumstances:

- ◆ Any event, illness or accident having been observed previously, a relapse, aggravation or hospitalisation between the purchase date of the stay in the date of subscription of the insurance contract;
- ◆ Any circumstance that is only a simple inconvenience;
- ◆ Conditions of pregnancy, related complications, beyond the 28th week of pregnancy and, in all cases, voluntary abortion, childbirth, in vitro fertilisation and their consequences;
- ◆ Forgotten vaccination;
- ◆ Default of any kind, including financial, of the trip organiser or of the transporter, rendering execution of its contractual obligations impossible;
- ◆ The absence of snow or excess snow;
- ◆ Any medical event for which the diagnosis, symptoms or cause are of a mental, psychological or psychiatric nature, and which did not result in hospitalisation of greater than 3 consecutive days following subscription of this Contract;
- ◆ Pollution, the local sanitation situation, natural disasters covered by the procedure mentioned by law no. 82.600 of 13 July 1982, as well as their consequences, meteorological or climatic events;
- ◆ The consequences of penal procedures in which you are involved;
- ◆ Any absence of hazard;
- ◆ An act that is intentional and/or reprehensible by the Law, the consequences of inebriation and the consumption of drugs, of any narcotic substance mentioned in the Public Health Code, of medications and treatments not prescribed by a doctor;
- ◆ Due to the mere fact that the geographical destination of the trip is ill-advised by the French Ministry of Foreign Affairs;
- ◆ An act of negligence on your part;
- ◆ Any event for which responsibility could be incumbent upon the travel agency in application of the Tourism Code in effect;
- ◆ Non-presentation, for any reason at all, of documents which are necessary for the stay, such as passport, identification card, visa, transport tickets, vaccination records.

DAMAGE TO POSSESSIONS OF THE SCHOOL AND OF THE HOST FAMILY

DEFINITIONS SPECIFIC TO THE GUARANTEE

Claim

Any request for remedy, amicable or through legal means, made by the victim of a loss or his beneficiaries, and sent to the Insured or his Insurer.

Loss

Notwithstanding the heading "DEFINITIONS COMMON TO ALL GUARANTEES", loss refers to any harm or group of harmful events caused to third parties, engaging the liability of the Insured, resulting from a harmful event and giving rise to one or more claims. The harmful event is that which constitutes the cause which generates the loss. A group of harmful events having the same technical cause is assimilated to a single harmful event.

WHAT IS THE PURPOSE OF THE GUARANTEE?

We guarantee, within the limit of the amount indicated in the Table of Guarantees, the pecuniary consequences of the Damage for which you are responsible, including the costs and expenses which, with our approval, are disbursed for the defence against a claim for damages for:

- Unintentional property damage to possessions of the school or of the host family.

We also guarantee the legal fees and expenses that may be demanded by each claimant and any costs and expenses that we have approved in writing.

In the event of death, this cover will be applicable to your personal legal representatives as if they were in your name.

Our cover, concerning one or all the events of a chain which stem from the same cause, will not be able to exceed the amount indicated in the Table of the Guarantees.

WHAT WE EXCLUDE

Other than the exclusions appearing in the section "WHAT ARE THE GENERAL EXCLUSIONS APPLICABLE TO ALL OUR GUARANTEES", we may not become involved for:

- **Property, possession of a building or land;**
- **Vehicles that are drawn by horses, which are motorised or mechanically operated, caravans, trailers, trailer tents, airplanes or watercraft;**
- **Bodily harm to persons who are employed by the Insured and which occurs as a result of or during such employment;**
- **Loss or damage to property owned by the Insured or which is under his management, authority or control;**
- **Any intentional act of the Insured;**
- **Any profession or business or practical work related to a study;**
- **Any contract that is established by the Insured or of which he is a party, except when the Insured would have engaged its responsibility even if this contract did not exist;**
- **Any act not within the jurisdiction of the courts of the country where the event that caused the Loss occurred;**
- **Death or bodily harm or illness of a member of the Insured's family, his traveling companion or a member of the Insured's household or damage to their property;**
- **The use or ownership of weapons.**

WHAT ARE THE OBLIGATIONS IN CASE OF LOSS?

Report your loss to ASSUR TRAVEL as soon as possible.

If you receive information from a Third party in connection with an event that may end with a request in this regard, you must send us this information without confirming receipt of it.

YOU MUST NEVER ACCEPT RESPONSIBILITY, MAKE OFFERS, PAYMENT PROMISES, OR PAYMENTS, WITHOUT PRIOR OR WRITTEN APPROVAL FROM THE INSURER.

Documents required:

- Detailed statement describing the event as well as the contact details of the harmed third party, the response from your Residential Multi-risk insurer following your declaration of Loss,
- Initial invoices for damaged equipment and invoices for the related repairs,
- Medical certificates, assessment reports,
- Proof of payment for repairs,
- Any envelope, notification or formal notice which could trigger the guarantee.

INDIVIDUAL ACCIDENT**DEFINITIONS SPECIFIC TO THE "INDIVIDUAL ACCIDENT" GUARANTEE****Beneficiary(ies)**

The person or persons who receive the amounts due for a claim from the Insurer.

In the event of the death of the Insured, unless another person has been designated by the Insured, the sum specified is paid:

- if the Insured is married: his spouse from whom he is not legally separated or divorced, or else his children born or to be born, alive or represented, or else his heirs,
- if the Insured is a signatory of a PACS, his partner, or else his heirs,
- if the Insured is widowed or divorced: his children, or else his heirs,
- if the Insured is unmarried: his heirs.

In all other cases the other amounts are paid to the Insured victim of the accident.

Any person who intentionally caused or provoked a loss is excluded from the Guarantee.

Bodily harm

Notwithstanding the definition provided for in §Definition of the section Provisions Common to all Guarantees, refers to any unintentional bodily harm to the victim resulting from the sudden action of an external cause.

By extension to this definition, pathological manifestations that are the direct consequence of this bodily harm are guaranteed.

The following are assimilated to accidents:

- injuries caused by fire, steam, acids and corrosives, lightning and electric current;
- asphyxiation by immersion and asphyxiation by unexpected absorption of gases or vapours;
- the consequences of poisoning and bodily injury due to the unintentional absorption of toxic or corrosive substances;
- cases of sunstroke, congestion and freezing following shipwrecks, forced landings, collapses, avalanches, floods or any other accidental events;
- the direct consequences of animal bites or insect bites, excluding diseases (such as malaria and sleeping sickness), the origin of which may be related to such bites or stings;
- injuries that may occur during the practice of scuba diving, including those due to cold water drowning or decompression;
- bodily injury resulting from assaults or attacks on the Insured unless it is proven that he or she was actively involved as the perpetrator or instigator of these events;
- the physiological consequences of surgical operations, provided that they have been necessitated by an accident included in the guarantee.

The following are not assimilated to accidents:

- aneurysm ruptures, heart attack, brain embolism, epileptic seizures, meningeal haemorrhage.

Permanent Disability

Presumed definitive impairment of the Insured's physical abilities. The degree is quantified by a rate determined by reference to the Social Security disability scale.

WHAT IS THE PURPOSE OF THE GUARANTEE?

We guarantee payment of the compensation defined below, which is provided for and the amount of which is set in the Table of Guarantees, in the event of an accident to the Insured involving bodily harm.

WHAT WE EXCLUDE

Other than the exclusions appearing in the section “WHAT ARE THE GENERAL EXCLUSIONS APPLICABLE TO ALL OUR GUARANTEES”, we may not become involved under the following circumstances:

- ◆ Accidents caused or provoked intentionally by the Insured, the consequences of his suicide or attempted suicide, as well as accidents caused by the use of drugs or narcotics not prescribed medically,
- ◆ Accidents occurring when the Insured is a driver of a vehicle and his blood alcohol level is higher than that legally allowed in the country where the accident occurs,
- ◆ Accidents resulting from the Insured's participation in a fight (except in the case of self-defence or assistance to a person in danger), a duel, an offense or a criminal offense,
- ◆ Accidents occurring during the use as a pilot or crew member of a device that permits movement through the air or when playing sports with or from these devices,
- ◆ Accidents caused by the practice of a sport in a professional capacity and the practice, even as an amateur, of any sports requiring the use of motorised mechanical equipment, either as a driver or passenger. Practicing a sport means training, testing, participation in sporting events or competitions,
- ◆ Accidents caused by war, civil or foreign, declared or not,
- ◆ Accidents due to ionising radiation emitted by nuclear fuels or by radioactive products or waste, or caused by weapons or devices intended to explode by modification of the structure of an atomic nucleus.

NATURE OF INDEMNITIES

DEATH

If the Insured victim of a covered accident dies within a maximum period of 24 months following the date of the accident, we pay the person(s) designated in the Bulletin as beneficiary/ies the benefit stated in the Guarantee Table.

When, prior to the death, the same accident has resulted in payment of compensation for permanent disability in accordance with the following conditions, the benefit shall be reduced by the amount of this indemnity.

The officially recognised disappearance of the body of the Insured following sinking, disappearance or destruction of the means of transport in which he travelled, will result in the presumption of death at the end of the period of one year from the day of the accident.

However, if it were found at any time after the payment of compensation for the disappearance of the Insured, that he was is still alive, the sums unduly paid in this respect would have to be fully refunded.

PERMANENT DISABILITY

When the Accident causes permanent disability, we pay the Insured an indemnity, the maximum of which corresponds to the rate of 100% of the social security disability scale.

If the Disability is only partial, the Insured is only entitled to a fraction of the indemnity, in proportion to the degree of disability.

Disabilities that are not listed are compensated according to their seriousness compared to those listed.

The indemnity is of a fixed and contractual nature and is determined according to the rules stated above, regardless of the age or profession of the Insured.

The degree of disability will be established when the final consequences of the Accident can be set with certainty and, at the latest, unless otherwise agreed between the Insured and us, upon expiry of one year following the day of the accident.

There is no accumulation of death and disability benefits when they result from the same accident.

MULTIPLE DISABILITIES

When the same Accident causes several distinct disabilities, the primary disability is first assessed under the conditions provided for above, the other disabilities are then estimated successively, in proportion to the remaining capacity after addition of the previous ones, without the overall rate being able to exceed 100%.

Total functional incapacity of a limb or organ is assimilated to loss of this limb or organ.

The loss of limbs or organs that could not be used before the accident results in no compensation. If the Accident affects a member or organ that was already disabled, the compensation will be determined by comparing the difference between the condition prior to and after the Accident. Under no circumstances may evaluation of the injuries resulting from the Accident be increased by the state of disability of limbs or organs not affected by the accident.

Nervous disorders and nerve damage cannot be taken into consideration, inasmuch as they are the result of a covered Accident, unless they result in clearly demonstrated clinical signs.

Excess: The permanent disability rate shall exceed 10%.

WHAT ARE YOUR OBLIGATIONS IN CASE OF LOSS?

In the event of a loss, it is important for us to be quickly and fully informed about the circumstances in which it occurred and its possible consequences.

NECESSARY FORM AND INFORMATION

You or your beneficiaries, or any representative acting on your behalf, must declare, in writing or verbally in exchange for confirmation, any loss to ASSUR TRAVEL within fifteen days (15), at the latest, after the date that you or they became aware of it.

If the declaration of loss is not done within the period specified above, except in the event of unforeseen circumstances or force majeure, we may apply forfeiture of the guarantee when we can establish that the delay in declaration has caused us harm (article L.113-2 of the Insurance Code).

In addition, we must be provided with this declaration, all information on the seriousness, causes and circumstances of the loss and, if possible, the names and addresses of the witnesses and responsible parties.

The declaration of the loss must include:

- the date, circumstances and location of the accident;
- the last and first names, date of birth, address and occupation of the victim(s);
- the initial medical certificate describing the nature of the wounds or injuries and their likely consequences;
- if applicable, the report of the police or gendarmerie, the names and addresses of the party responsible for the accident and any witnesses.

The victim or his beneficiaries must make every effort to limit the consequences of the accident and to, in particular, seek the medical care necessitated by the condition of the victim.

Agents and doctors, designated by us, will have, unless there is justified objection, free access to the victim and his physicians to ascertain his condition. Any intentional misrepresentation of the date or circumstances of an Accident, duly recorded and of such a nature as to be prejudicial to us, shall result in forfeiture of entitlement to the indemnity which, if already settled, must be refunded to us.

VERIFICATION

You are obligated to submit to an examination by doctors whom we have delegated and our representatives will have free access to you whenever we deem it useful, **under penalty for you or for any Beneficiary to incur forfeiture of your rights in the event that, without a valid reason, you refuse to permit verification by our delegates or hinder the performance of this verification if, after notice given forty-eight hours in advance by registered letter, we encounter persistent refusal due to your fault or continue to be impeded in performing our verifications.**

Any fraud, reluctance or misrepresentation by you or the Beneficiary of the indemnity, intended to mislead us about the circumstances or consequences of a claim, will result in the loss of any right to compensation for the claim in question.

PAYMENT OF INDEMNITIES

DETERMINATION OF THE CAUSES AND CONSEQUENCES OF THE ACCIDENT

The causes of the Accident and its consequences and the rate of disability are observed by agreement between the parties or, in the absence of agreement, by two doctors, one having been designated by each of the parties. In case of disagreement, they will be joined by a third doctor to break the tie between them; if they do not agree on the

choice of this third doctor or if one of the parties does not designate his expert, the designation will be done at the request of one of the parties by the Presiding Judge at the Tribunal de Grande Instance at the residence of the Insured, dispensing with swearing of oath and all other formalities.

Each party shall retain responsibility for the fees and expenses relating to involvement of the doctor that he has designated, and they shall share those for involvement of the third doctor equally between them.

AGGRAVATION SEPARATE FROM THE ACCIDENTAL EVENT

Whenever the consequences of an Accident are aggravated by the victim's constitution, by a lack of care due to negligence or treatment, pre-existing illness or disability and, in particular, by a diabetic or hematic condition, the compensation due will be determined by the consequences that the Accident would have had on a healthy and normal subject undergoing reasonable treatment.

PAYMENT OF THE INDEMNITY

Guaranteed indemnities are payable:

- In the event of death and permanent disability, within one month following receipt of the supporting documents regarding accidental death of the Insured and the status of the Beneficiary, or the agreement of the parties on the degree of disability.
- In the absence of the agreement of the parties, settlement of the indemnities will take place within fifteen days after the legal decision has become enforceable.

DESCRIPTION OF ASSISTANCE GUARANTEES

You are sick, injured, or you die during your Stay. We intervene under the following circumstances:

REPATRIATION ASSISTANCE

1/ REPATRIATION OR MEDICAL TRANSPORT

You are sick or injured during your Stay. We organise and pay for your repatriation to your Domicile or to the hospital establishment close to your home.

Only requirements of a medical nature are taken into consideration for determining the date of repatriation, the choice of means of transport or the location of hospitalisation.

The decision of repatriation is taken into account by our medical consultant, after obtaining an opinion from the local care provider and, eventually, the family doctor.

At the time of your repatriation, and upon instructions from our medical consultant, we organise and cover transport for a person to accompany you.

Any refusal of the solution proposed by our medical team results in cancellation of the guarantee of assistance to persons.

2 / REPATRIATION OF 2 ACCOMPANYING PERSONS

You are repatriated for medical reasons, or you die during your Stay.

We organise and cover, if they may not return home by the means initially foreseen, the transport of two insured persons accompanying you at the time of occurrence of the event, based on a plane ticket in economy class or a train ticket in 1st class.

3/ VISIT OF A FAMILY MEMBER/CLOSE FRIEND

You are hospitalised on site by decision of our medical team, before your medical repatriation, for a duration equal to or greater than 5 consecutive days. We organise and cover the round-trip transport by plane in economy class or by train in 1st class of a person close to you residing in the same country as you, as well as his expenses for stay (room, breakfast) so that he may be at your bedside.

Our coverage for his accommodation is provided to the limit of the amount indicated in the Table of Guarantees.

Expenses for dining or other expenses are not covered by the guarantee.

This family member/close friend will be able to benefit, during his Stay, from the "REPATRIATION OR TRANSPORT DUE TO HEALTH" and "MEDICAL FEES" guarantees under this Contract, for a maximum duration of 10 days and up to the limits indicated in the Table of Guarantees.

This "Visit of a family member/close friend" guarantee may not be combined with the "Repatriation of accompanying persons" guarantee.

4/ PROLONGATION OF STAY

Following an illness or Accident during your Stay, you are unable to travel on the date originally scheduled on your return ticket.

We cover the expenses for accommodation following this prolongation within the limit of the amount indicated in the Table of Guarantees.

We also cover your transport costs, if the ticket provided for your return can not be used, on the basis of a train ticket in 1st class train or a plane ticket in economy class.

Only requirements of a medical nature are taken into consideration to grant this guarantee.

Expenses for dining or other expenses are not covered by the guarantee.

5/ EARLY RETURN

If you have to interrupt your Stay prematurely in the cases listed below, we will cover the return trip, on the basis of a train ticket in 1st class train or a plane ticket in economy class.

We intervene in case of:

- hospitalisation of a member of your family, of a person responsible for looking after your minor-age and/or handicapped child who remained at home,
- the demise of a member of your family, of a person responsible for looking after your minor-age and/or handicapped child who remained at home,
- serious event affecting your primary residence in your home country or your business premises.

6 / REPLACEMENT ESCORT

If you are accompanying a group and your stay is interrupted due to medical repatriation organised by us or in case of death, we organise and cover the transport, by airplane in economy class or by train in 1st class, the transport of a replacement escort, as designated by the employer, to the location of your assignment. The transport of the replacement employee will have to take place in the 2 months which follow your repatriation for medical reasons or death.

MEDICAL FEES AND HOSPITALISATION

1 / MEDICAL EXPENSES AND HOSPITALISATION OUTSIDE HOME COUNTRY

The purpose of the guarantee is to reimburse, within the limit of the actual costs that you would have incurred, all or part of the health expenses incurred as a result of an unexpected illness or an Accident both in private life and during your student or temporary professional activities.

The guarantee is subscribed in addition to the one you receive from your Health Insurance Organisation or from the 1st euro when you do not benefit from the aforementioned coverage.

In any case, the guarantee cannot exceed the amount of expenses actually incurred.

You are guaranteed for the reimbursement of your hospitalisation expenses and medical expenses prescribed by any medical authority abroad, following bodily harm occurring and observed abroad during your stay.

This service ceases as of the date that we are effectively able to complete your repatriation.

This reimbursement covers the expenses defined below, provided that they involve care received by you outside your country of residence (excluding the waiver specified in the paragraph "MEDICAL EXPENSES AND HOSPITALISATION IN CASE OF TEMPORARY RETURN OF THE INSURED TO HIS COUNTRY OF RESIDENCE", following an illness or Accident having occurred outside your country of residence. In this case, we reimburse the amount of the expenses incurred up to the amounts specified in the Table of Guarantees.

Expenses granting the right to services due to a covered event:

- ✓ medical fees,
- ✓ expenses for medications prescribed by a doctor or surgeon,
- ✓ expenses for hospitalisation provided that you are deemed unfit to be transported according to the decision of our doctors, taken after receiving information from the local doctor (the expenses for hospitalisation incurred starting from the day that we are able to carry out your repatriation are not covered),
- ✓ in general, any medical or surgical procedure related to your pathology,
- ✓ Transportation costs to transport you to the nearest hospital if you are physically unable to use public transportation and if they are prescribed by a doctor,
- ✓ Urgent dental care,
- ✓ Expenses for physical therapy prescribed by a doctor: 10 sessions maximum.
- ✓ Chiropractic fees: 5 sessions maximum,
- ✓ Alternative medicine: 3 sessions and € 50/session.

The maximum amount of reimbursements for emergency dental expenses (natural teeth) is indicated in the Table of Guarantees. Cleanings, check-ups and other routine treatments are excluded. In case of dental treatment exclusively due to an Accident occurring during the period of validity of the Contract, and not resulting from subsequent damage to the teeth, it is only considered as an Accident when you also suffer from other bodily injuries for which medical or hospital treatment is required. Crowns, bridges and braces are not considered natural teeth.

EXTENSION OF THE SERVICE: ADVANCE OF HOSPITALISATION FEES (only abroad)

To the limit of the coverage amounts specified above, we are able to advance expenses for hospitalisation which you must incur outside your country of residence, under the following cumulative conditions:

- VYV INTERNATIONAL ASSISTANCE physicians, after having received information from the local physician, must determine that it is impossible to immediately repatriate you to your country of residence.
- The treatments for which an advance is to be made must be prescribed with the agreement of VYV INTERNATIONAL ASSISTANCE physicians.
- You or any person authorized by you, must formally, through the signing of a specific document provided by VYV INTERNATIONAL ASSISTANCE upon implementation of this benefit:
 - take the necessary steps with the insurance agencies for coverage of the expenses within 15 days following the date on which VYV INTERNATIONAL ASSISTANCE transmits all of the information necessary for these steps;
 - reimburse VYV INTERNATIONAL ASSISTANCE for the sums you have received from the insurance agencies in that regard within one week thereafter.

Only the expenses that are not covered by the insurance agencies will remain our responsibility up to the amount specified for the "Medical expenses" benefit. You must provide us with a certificate of no-coverage issued by these insurance agencies within one week following the receipt thereof.

In order to protect our subsequent rights, we reserve the right to ask you or your successors-in-interest for a letter in which you commit to take the necessary steps with the social agencies and reimburse us for the amounts received.

If you fail to promptly take those steps with the insurance agencies, or to promptly provide VYV INTERNATIONAL ASSISTANCE with the certificate of no-coverage issued by the insurance agencies, you will not in any circumstance be entitled to the « medical expenses» benefit, and you will be required to reimburse all of the hospitalization expenses advanced by VYV INTERNATIONAL ASSISTANCE, which, if necessary, may take any action to obtain payment at your expense.

In the event that we advance funds, up to the amounts expressed in the Table of Guarantees, you agree to pay us the reimbursements obtained from the welfare and insurance organisations within 3 months following the advance.

2/ MEDICAL AND HOSPITALISATION COSTS IN CASE OF TEMPORARY RETURN OF THE INSURED TO HIS HOME COUNTRY

You return to your home country following medical repatriation that we have organised. In this case, the guarantee is limited to a maximum of 30 days from the date of arrival in your home country.

OR

Your temporary return of up to 30 consecutive days in your home country takes place, although the duration of your stay abroad has not expired, according to the dates on your membership form.

We can, within the limit of the amount indicated in the Table of Guarantees, refund the medical or hospitalisation expenses which you must incur in your home country, following an Illness or serious Accident.

The guarantee "hospitalisation expenses" only applies to the expenses which have been the subject of approval by our medical service, materialised by the communication of a file number to you or to any person acting on your behalf, once validity of the request is observed.

If you are covered by any insurance company (social security or other), we will reimburse you in addition to these organisations. We only intervene once these organisations have processed their reimbursements, subject to communication of the original proof of reimbursement from these organisations.

If you are no longer covered by the welfare and insurance organisations in your country of residence, we will reimburse you within the limit of the amount of the benefit specified in the Table of Guarantees for “MEDICAL AND HOSPITALISATION EXPENSES”.

However, you must provide us with the certificate(s) of refusal of cover from these insurance organisations, within one week of receipt.

This benefit ceases no later than the expiry date of your Contract, which appears on your subscription form.

Expenses granting the right to services due to a covered event:

- ✓ General Practitioners and Specialists visits,
- ✓ Pharmacy and nursing costs prescribed by a registered doctor or a surgeon,
- ✓ Medical and surgical hospitalisation costs, including medical and surgical fees and, generally, any medical or surgical treatment linked to your pathology,
- ✓ The cost of ambulances or taxis prescribed by a doctor,
- ✓ Emergency dental care as defined in the paragraph “MEDICAL AND HOSPITALISATION EXPENSES OUTSIDE THE HOME COUNTRY”.

3/ WHAT IS THE SCOPE OF APPLICATION OF THE “MEDICAL AND HOSPITALISATION EXPENSES” GUARANTEE?

The medical procedures covered are those specified in the paragraph entitled “Expenses granting the right to benefits” provided that they are:

- prescribed and practiced by a competent medical authority,
- recognised by this same authority as medically appropriate and indispensable to treatment of the pathology both in quantity and quality,
- in accordance with the Medical Practices in effect as defined under “DEFINITIONS COMMON TO ALL GUARANTEES”,
- reasonably priced and usually practiced for the treatment in question in the country in which they are provided, being specified that the manager may provide a cost reference guide by country upon request,
- practiced preferably in the public sector or cost-controlled sector when these sectors exist in your home country, and they are not the subject of an exclusion from the contract,
- The guarantees taken into account for calculation of reimbursements are those in effect on the date that the care is provided by the healthcare professional.

4/ WHAT ARE YOUR OBLIGATIONS IN CASE OF A CLAIM?

➤ **For reimbursement of your medical expenses (excluding hospitalisation)**

To benefit from the reimbursement of your medical expenses (which did not result in hospitalisation), you will have to provide the ASSUR TRAVEL - GAPI management service with the following documents:

- ASSUR TRAVEL membership number and contract number MGENIB1100265SAN,
- Bank identification statement (only for the 1st request for reimbursement) or an eventual procuration,
- Original or digitized invoices for paid medical treatments and the corresponding proofs of payments,
- Original or digitized medical prescriptions,
- The medical claim form duly completed, signed and stamped by the doctor, including any medical reports (hospitalisation reports, Specialists visits reports, analyses),
- In case of medical treatment in France: original treatment forms (CERFA documents) and/or medical invoiced paid with the payment receipts or failing the corresponding Social security slips.
- Any other documents that the Insurer deems necessary.

For medical expenses less than 500 €, you can scan the invoices and send them to us by email (keep the originals, they may be requested in case of verification by the Insurer).

➤ **In case of request for advance of hospitalisation expenses**

For an advance of hospitalization expenses, contact VYV INTERNATIONAL ASSISTANCE as soon as possible at 00 33 (0) 5 86 85 00 57

DEATH ASSISTANCE

1/ REPATRIATION OF REMAINS

You die during your Stay. We arrange repatriation of your remains to the location of the funeral in your home country.

Within this framework, we cover:

- ✓ Expenses for transport of the body,
- ✓ The expenses related to conservation required by applicable legislation,
- ✓ Costs directly necessitated by the transport of the body (handling, specific arrangements for transport, preparation).

2/ FORMALITIES RELATED TO DEATH

If the presence on site of a member of the family or of a close friend of the deceased is necessary to identify the remains and for the formalities of repatriation or incineration, we organise and cover the round-trip transport by plane in economy class or train in 1st class, as well as the expenses of stay (room and breakfast) incurred on behalf of this person, to the limit of the amount indicated in the Table of Guarantees.

All other costs remain the responsibility of the person concerned.

This person will be able to benefit, during his Stay, from the “REPATRIATION OR TRANSPORT DUE TO HEALTH” and “MEDICAL EXPENSES” guarantees under this Contract, for a maximum duration of 8 days and up to the limits indicated in the Table of Guarantees.

ASSISTANCE IN CASE OF EPIDEMIC OR PANDEMIC

1/ ACCOMMODATION FEES IN CASE OF QUARANTINE

If you are forced to extend your stay following your quarantine:

- For insured adults: we organize and take in charge the hotel costs (room and breakfast) as well as those of the members of your beneficiary family or of an insured accompanying person, up to a maximum of 80 € TTC per night with a maximum of 14 nights per person.
- For insured minors: **only in agreement with the adult accompanying person with whom the exchanges will directly take place and under the responsibility of the latter, the Assistance platform will find the hotel that will accommodate the young minor.**

This accompanying person will have been previously designated by the agency or the two legal representatives whose respective agreement will be essential. He/she will also be in charge of the young minor for the duration of his/her quarantine and until his/her departure from the territory.

We will then take in charge the hotel costs (room and breakfast) as well as those of your beneficiary family members or an insured accompanying person, up to a maximum of € 80 including tax per night with a maximum of 14 nights per person

2/ PSYCHOLOGICAL SUPPORT FOLLOWING QUARANTINE

In the event of significant trauma following an event related to an epidemic or pandemic, we can put you, at your request, in relation with a psychologist, within the limit of 6 phone interviews per event. These interviews are entirely confidential.

This work of listening is not to be confused with the psychotherapeutic work done in private practice. In no case, due to the physical absence of the caller, this service can replace psychotherapy.

3/ IMPOSSIBLE PLANNED RETURN

Your flight has been canceled or your boarding has been refused due to measures taken by the local government or airlines companies to restrict the movement of people in the event of an epidemic or pandemic.

If you are forced to extend your stay:

- For insured adults: we organize and take in charge the hotel costs (room and breakfast) as well as those of the members of your beneficiary family or of an insured accompanying person, up to a maximum of 80 € TTC per night with a maximum of 5 nights per person.
- For insured minors: **only in agreement with the adult accompanying person with whom the exchanges will directly take place and under the responsibility of the latter, the Assistance platform will find the hotel that will accommodate the young minor.**

This accompanying person will have been previously designated by the agency or the two legal representatives whose respective agreement will be essential. He/she will also be in charge of the young minor for the duration of his quarantine and until his departure from the territory.

We will then take in charge the hotel costs (room and breakfast) as well as those of your beneficiary family members or an insured accompanying person, up to a maximum of € 80 including tax per night with a maximum of 5 nights per person.

If necessary, we also extend the duration of your coverage by a maximum of 6 days.

4/ SUPPORT FOR A LOCAL PHONE PLAN

If you are quarantined during a guaranteed trip out of your country of residence, we take care of the costs of a local phone plan, up to a maximum of 80 € including tax.

5/ PSYCHOLOGICAL SUPPORT FOLLOWING REPATRIATION

In the event of significant trauma following an event related to an epidemic or pandemic, we can put you, at your request, in relation with a psychologist, within the limit of 6 phone interviews per event. These interviews are entirely confidential.

This work of listening is not to be confused with the psychotherapeutic work done in private practice. In no case, due to the physical absence of the caller, this service can replace psychotherapy.

ASSISTANCE FOR UNFORESEEN CIRCUMSTANCES

1/ SENDING OF MEDICATIONS ABROAD

During your Stay, you do not have medications which are necessary for your health, following loss or theft. We cover the search and transport of these medications, in case these medications or equivalent medications, advised by our doctors cannot be found on site (subject to obtaining the contact information of your primary care physician).

We cover the shipping of medications by the fastest means, subject to local and French legal restrictions.

The cost of the medications and eventual customs charges are your responsibility.

ADDITIONAL ASSISTANCE

1/ GENERAL INFORMATION BEFORE TRAVEL

(EVERY DAY FROM 8:00 AM TO 7:30 PM, FRENCH HOURS, EXCEPT SUNDAYS AND HOLIDAYS)

At your request, we can provide you with information regarding:

- ✓ the medical precautions to be taken before going on a trip (vaccines, medicines, etc.),
- ✓ the administrative formalities to be completed before or during travel (visas, etc.),
- ✓ the travel conditions (transport possibilities, flight schedules, etc.),
- ✓ the local living conditions (temperature, climate, food, etc.).
- ✓

2/ TRANSMISSION OF URGENT MESSAGES, TRANSLATION SERVICE

It is impossible for you to contact a person in your country of residence. We send the message if it is impossible for you to do so.

Messages sent may not be serious or sensitive in nature. The messages remain under the responsibility of their authors, who must be able to be identified, and commit only them. We only act as intermediary for transmitting them.

In an emergency, we can help you translate short messages. We point out that the use of this service must be occasional. At your request, we can put you in contact with a professional translator.

Translation costs are your responsibility.

EXCLUSIONS APPLICABLE TO ASSISTANCE GUARANTEES

In addition to the exclusions indicated in the "EXCLUSIONS APPLICABLE TO ALL OF OUR COVERS" rubric, we do not participate in the following circumstances:

- ◆ **Care:**
 - not medically prescribed,
 - not performed by a relevant medical authority as defined in the Lexicon,
 - inappropriate for the pathology,
- ◆ **Claims due to a non-covered event,**
- ◆ **Trips for the purpose of a diagnosis and/or treatment,**
- ◆ **Medical and hospitalization expenses in the country of residence.**
- ◆ **Illnesses existing prior to the effective date of the contract – any ailment of which the Subscriber or the Insured is aware on the date on which the covers take effect,**
- ◆ **Illnesses for which the Insured received treatment during the preceding 12 months, if they are not cured on the effective date of the contract, except for allergies that remain covered in the event of a relapse,**
- ◆ **Self-medication and self-treatment,**
- ◆ **Costs incurred in connection with administrative processes,**
- ◆ **The absence of risk,**
- ◆ **Ailments and vaccinations,**
- ◆ **Health checkups and medical examinations for purposes other than the healing or relief of an illness,**
- ◆ **Medical care that is not prescribed,**
- ◆ **Treatment not performed by a competent medical authority,**
- ◆ **Treatment inappropriate for the pathology,**
- ◆ **Any control or periodic exam or periodic controls, in connection with to contraception,**
- ◆ **Hormonal treatments, contraceptives and urinary incontinence treatments,**
- ◆ **Medical examinations related to pregnancy or maternity,**
- ◆ **Sexually transmitted diseases,**
- ◆ **Ophthalmologic prescriptions (spectacles and contact lenses),**
- ◆ **Consequences of**
 - **Psychiatric, neuropsychiatric or psychological diseases, any expressions requiring a neuropsychiatric treatment, for specifically, the nervous breakdown, the anxiety, the personality and/or behaviour disorders, the fibromyalgia, the eating disorders, the chronic fatigue syndrome,**
 - **Consumption of non-medically prescribed drugs,**
- ◆ **Treatments and products for weight loss and rejuvenation, and, more generally, all treatments and products for aesthetic satisfaction,**
- ◆ **Drunkenness, suicide or attempted suicide, and the consequences thereof,**
- ◆ **Any intentional mutilation by the Beneficiary / Insured,**
- ◆ **Benign ailments or lesions that cannot be treated on the site and/ or do not prevent the Insured from continuing his trip,**

- ◆ States of pregnancy, except in the event of unforeseeable complication, and, in any event, states of pregnancy beyond the 36th week, voluntary interruption of pregnancy, and the consequences of childbirth,
- ◆ Convalescences and ailments during treatment, not yet relieved and with a risk of sudden aggravation,
- ◆ Events related to a medical treatment or surgery, that were not foreseeable, fortuitous or accidental,
- ◆ The costs of optical, dental, acoustical and functional prostheses, orthopaedic or orthotic devices, spinal fixation apparatuses, etc.,
- ◆ The costs of thermal cures, aesthetic treatments and vaccinations,
- ◆ The costs of stays in a nursing home,
- ◆ The costs of stays in a rehabilitation centre,
- ◆ Planned hospitalizations,
- ◆ Medical claims for which a prior agreement of the Insurer has not been requested,
- ◆ Dental treatments other than emergency dental treatment,
- ◆ Vitamins, minerals, nutritional or dietary supplements, even if they are medically prescribed to obtain therapeutic effect,
- ◆ Costs of organs transplantation not required by a covered accident or illness,
- ◆ Costs of aesthetic or reconstructive surgery,
- ◆ Acne treatments, allergy treatments including allergy tests, with the exception of the first consultation and /or first emergency treatment,
- ◆ Any kind of aesthetic surgeries not consecutive to a covered event,
- ◆ Fertility tests and fertility treatments (male and female), tubal ligation, IFV, Medically-Assisted-Procreation,
- ◆ Premarital examinations,
- ◆ Preventive treatments not consecutive to a covered event,
- ◆ Treatment of insomnia,
- ◆ Vasectomy,
- ◆ Medical practice and treatments that fall into the area of research or experimentation or are not recognized as usual medical practices.

EXCLUSIONS APPLICABLE TO ALL OF OUR GUARANTIES

We do not participate in the following circumstances:

- ◆ Benefits that were not requested during the trip, or which we did not organize or to which we have not agreed, do not give a retrospective right to a reimbursement or indemnification,
- ◆ Accommodation and meal expenses, except for those specified in the covers,
- ◆ Damage that the Insured has caused intentionally, and damage resulting from his participation in a crime, tort or fight, except for his legitimate self-defence,
- ◆ The amounts of adverse court decisions and the consequences thereof,
- ◆ The use of narcotics or drugs that are not medically prescribed,
- ◆ Alcoholic inebriation,
- ◆ Customs duties costs,
- ◆ Participation in a sports competition or rally giving the right to a national or international classification, which is organized by a sports federation for which a license is granted, as well as training for the purpose of such competitions,
- ◆ Participation in any professional sports, semi-professional sports (for which a remuneration is perceived), or as holder of a licence of any sport federation,
- ◆ Participation in competitions or endurance and speed events, or in their preparatory tests, in any terrestrial, nautical or aerial vehicles,

- ◆ The consequences of a failure to comply with the safety rules applicable to participation in any recreational sports,
- ◆ The costs incurred after return from the trip, or expiration of the cover,
- ◆ Accidents resulting from your participation, even as an amateur, in the following sports: motor sports (regardless of the motorized vehicle that is used), aerial sports, high mountain alpinism, bobsledding, hunting of dangerous animals, ice hockey, skeleton bobsledding, combat sports, sports on snow that involve an international, national or regional classification,
- ◆ Participation in any sports in the « Dangerous Sports » category as defined in the « DEFINITIONS APPLICABLE TO ALL COVERS » rubric of this contract;
- ◆ Intentional failure to comply with the regulations of the visited country, or the performance of activities that are not authorized by the local authorities,
- ◆ Official prohibitions, seizures or constraints by the police,
- ◆ The Insured's use of aircraft,
- ◆ The use of military equipment, explosives and firearms,
- ◆ Damage resulting from the Insured's tortious misconduct or negligence in accordance with article L.113-1 of the Insurance Code and article L221-14 of the French Mutual Insurance Companies Code,
- ◆ Suicide and attempted suicide,
- ◆ Pollutions and natural disasters (except for the « Early return » cover),
- ◆ Epidemics (except for the Assistance covers)
- ◆ Civil or foreign wars, riots, strikes, mass demonstrations, attacks / acts of terrorism (except for the « Early return » cover), and hostage taking,
- ◆ Disintegration of the atomic nucleus or any radiation deriving from a source of energy of a radioactive nature.

Under no circumstance shall the Insurer be liable for a failure to execute its obligations, or for a complication in that regard, which is due to a situation of *force majeure* or events such as civil or foreign wars, riots or mass demonstrations, lockdowns, strikes, attacks, acts of terrorism, piracies, storms, hurricanes, earthquakes, cyclones, volcanic eruptions or other natural disasters, disintegration of the atomic nucleus, radioactive nuclear effects, epidemics, effects of pollution or radiation, or any other fortuitous situations or events of *force majeure*, as well as their consequences.



GROUPAMA Rhône Alpes Auvergne
CONTRACT INFORMATION NOTICE
“CIVIL LIABILITY PRIVATE LIFE”
No. 42190225 D



Bodily harm, property damage and consequential losses: 150,000 € per claim

Including

Consecutive property damage and consequential losses with a straight deductible of 100 € per claim: 150,000 € per claim

DEFINITIONS

Bodily harm

Any bodily harm endured by a natural person and the resulting losses.

Property damage

Any deterioration or destruction of a thing or substance. Any physical harm to an animal.

Consecutive consequential loss

Any financial harm resulting from total or partial loss of enjoyment of a right, from loss of a benefit, from the loss of clientele, from interruption of a service or an activity and which is the direct or indirect consequence of covered bodily harm or property damage.

Causal event

Event that represents the cause of the damage.

Straight deductible

The sum (or percentage) that remains the responsibility of the Insured in the amount of the indemnity due by the Insurer.

The deductible applies per event, regardless of the number of victims. Deductibles expressed as a percentage apply to the amount of the indemnity due by the Insurer.

Accidental pollution

Emission, dispersion, release or deposit of any solid, liquid or gaseous substance, diffused by the atmosphere, soil or water, that results from a sudden and unforeseen event and that occurs slowly, gradually or progressively.

Claim

Any request for remedy, amicable or through legal means, made by the victim of a loss or his beneficiaries, and sent to the Insured or his Insurer.

Civil liability

Legal obligation incumbent on any person to remedy harm caused to another.

Loss

Any loss of group of losses caused to third parties, engaging the responsibility of the Insured, resulting from a harmful event and having resulted in one or several claims. The harmful event is that which constitutes the cause which generates the loss. A group of harmful events having the same technical cause is assimilated to a single harmful event.

Third Party

Any person other than the Insured.

Motorised land vehicle

Machine that moves on the ground (i.e., other than by air or sea), without being linked to a railway, is automotive (propelled by its own motive power) and which serves to transport persons (even if this is only the driver) or things.

1. PURPOSE OF THE GUARANTEE

The Insurer guarantees the Insured against the financial consequences of civil liability which could be incumbent upon him due to bodily harm, property damage and consequential losses, caused to third parties in the course of his private life.

Private life refers to any activities not related to professional activities.

Defence

a. Supervision of the Trial

For harm falling within the framework of the guarantees and within the limits of these, the Insurer is solely in charge of supervision of the lawsuit brought against the Insured and is free to exercise the means of appeal.

The Insurer covers the costs and fees of inquiry, investigation, expertise, lawyer and trial costs. These fees and expenses are deducted from the applicable guarantee amount.

Supervision by the Insurer of the Insured's defence is not deemed as renunciation by the Insurer of availing itself of any guarantee exception of which it was not aware at the time that it took over supervision of this defence.

In the event of a criminal trial in which civil interests are or will be sought in the context of this procedure or any other, the Insured agrees to associate the Insurer with his defence without this commitment modifying the scope of the guarantee of this contract.

Under penalty of forfeiture, the Insured must not interfere in supervision of the trial when the purpose for it is related to the "Civil Liability Private Life" guarantee.

b. Settlement agreement

The Insurer alone has the right within the limits of its guarantee to seek a settlement with the injured parties.

No settlement or recognition of liability occurring outside of the Insurer is enforceable against it.

However, acceptance of the materiality of the facts is not considered as recognition of responsibility, nor is the mere act of having obtained urgent care for a victim, when this involves an act of assistance that any person has the legal or moral duty to carry out.

2. EXCLUSIONS

Exclusions include:

- ◆ The consequences of intentional fault on the part of the Insured.
- ◆ Losses caused by civil or foreign war, declared or not, riots or demonstrations, acts of terrorism, attacks or sabotage.
- ◆ Damage caused by volcanic eruptions, earthquakes, storms, hurricanes, cyclones, floods, tidal wave and other cataclysms.
- ◆ Losses rendered as unavoidable due to voluntary acts by the Insured and which deprive the insurance contract of the notion of randomness in covering uncertain events (article 1964 of the Civil Code).
- ◆ Fines and any other penal sanction assessed against the Insured personally.
- ◆ Damage or aggravation of the damage caused:
 - by weapons or devices intended to explode by modification of the structure of an atomic nucleus,
 - by any nuclear fuel, radioactive product or waste,
 - by any source of ionising radiation (particularly any radioisotopes).
- ◆ The consequences of the presence of asbestos or lead in buildings or structures belonging to or occupied by the Insured, work for the search, destruction or neutralisation of asbestos or lead, or the use of products containing asbestos or lead.
- ◆ The consequences of contractual commitments accepted by the Insured and that have the effect of aggravating the liability that would have been incumbent on it in the absence of said commitments.
- ◆ In the United States of America and Canada:
 - punitive damages or exemplary damages,
 - damages for pollution.
- ◆ Losses of the nature of those mentioned in article L. 211-1 of the Insurance Code on the obligation of automobile insurance and caused by motorized land vehicles, their trailers or semi-trailers owned or used by the Insured, or in his custody (including due to or due to falling of accessories and products serving for the use of the vehicle, and of objects and substances that it transports).

- ◆ Consecutive property damage and consequential losses, caused by a fire, explosion or water damage having occurred in the buildings that the Insured owns, rents or occupies.
- ◆ Thefts committed in the buildings mentioned in the preceding exclusion.
- ◆ Consecutive property damage (other than that mentioned in the two preceding exclusions) and consequential losses caused to property entrusted to the Insured, used by it or deposited with it.
- ◆ The consequences of air, maritime, fluvial or lake navigation by means of equipment owned or used by the Insured or in his custody.
- ◆ Damage caused by weapons or munitions that are held illegally and which are possessed or in the custody of the Insured without prefectural authorisation.
- ◆ Losses covered by a legal obligation of insurance and resulting from the practice of hunting.
- ◆ Damage caused by animals other than domestic animals.
- ◆ Losses caused by dogs of the first category (attack dogs) and of the second category (watchdogs and dogs for defence), defined in article 211-1 of the Rural Code, and by wild animals that are tamed or held in captivity, mentioned in article 212-1 of the Rural Code, stray or not, of which the Insured is the owner or keeper (law no. 99-5 of 6 January 1999 relative to dangerous and stray animals and to the protection of animals).
- ◆ The consequences:
 - of the organisation of sports competitions;
 - of the practice of sports as the holder of a license from a sports federation;
 - of practicing air or water sports.

3. GUARANTEE PERIOD

The guarantee of the present contract is triggered by the causal event and covers the Insured against the pecuniary consequences of incidents, once the causal event occurs between the initial effective date of the guarantee and its date of cancellation or expiration, regardless of the dates of the other details of the incident (article L. 124-5 of the Insurance Code).

4. GUARANTEE AMOUNTS

The guarantee amounts expressed per event constitute the limit of the commitment of the Insurer for all claims relative to the same causal event.

The date of the loss is that of the harmful event. The conditions and guarantee amounts are those in effect on this date.

5. WHAT TO DO IN CASE OF A LOSS?

Under penalty of loss of cover, the Insured must declare his claim within 5 business days following the event with ASSUR TRAVEL who will send it to the Insurer to process it.

6. LEGAL INFORMATION

INSURER:

The contract is underwritten through **Groupe Special Lines** on behalf of:

Groupama Rhône-Alpes Auvergne - Caisse régionale d'Assurances Mutuelles Agricoles de Rhône-Alpes Auvergne - 50 rue de Saint Cyr - 69251 LYON Cedex 09 - SIRET no. 779 838 366 000 28 - Company governed by the Insurance Code and subject to regulation by the Autorité de Contrôle Prudentiel et de Résolution - 4, place de Budapest – CS 92 459 – 75 436 Paris Cedex 9.

HANDLING OF COMPLAINTS

In case of difficulty, the Subscriber contacts the Broker through whom the contract was subscribed.
If the answer does not satisfy him, the Subscriber may send his complaint to the "Réclamations" (complaints) department of Groupe Special Lines:

- By postal mail:
Groupe Special Lines
Service Réclamations
6-8 rue Jean Jaurès
92800 PUTEAUX
- By email: reclamations@groupespeciallines.fr

If the response to the complaint is still unsatisfactory, the Subscriber may contact the "Réclamations" (complaints) department of Groupama Rhône-Alpes Auvergne:

- By postal mail:
Groupama Rhône-Alpes Auvergne
Service Consommateurs
TSA 70019 – 69252 LYON CEDEX 09
- By email: Service-consommateurs@groupama-ra.com

Finally, if the disagreement persists regarding the position or the proposed solution, the Subscriber can refer the matter for Insurance Mediation:

- By postal mail:
Médiation de l'Assurance
TSA 50110
75441 PARIS CEDEX 09
- Online at www.mediation-assurance.org

REGULATOR:

In accordance with the French Insurance Code (Article L. 112-4) it is specified that the regulatory authority of GROUPE SPECIAL LINES and GROUPAMA is the **ACPR, 4, place de Budapest – CS 92 459 – 75 436 Paris Cedex 9.**