



General insurance conditions
E-GLOO PROTECT

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GENERAL CONDITIONS

Definitions and scope

Accident: Any sudden and unforeseen event, external to the victim or to the damaged item constituting the cause of damage.

Injury: Any unintentional bodily harm resulting from the sudden action of an external cause, confirmed by a *Doctor*.

Sport or leisure activity: Engaging in sport or leisure as an amateur, as part of a course or a sport or leisure activity pass featured in the policy of the insured benefit, and insured under this policy. Any official competition as an amateur or professional is not regarded as a sport or leisure activity.

Sport or leisure activity (in the context of the Nordic option): Cross-country skiing, snow shoeing, Nordic combined or biathlon as an amateur as part of a course or of the sport or leisure activity pass featured in the policy of the insured benefit, and insured under this policy. Any official competition as an amateur or professional is not regarded as a sport or leisure activity.

Insured party: Persons who appear in the policy of the insured benefit provided that their *Home* is located in Europe. However, for the "*Search costs* and/or *Rescue costs*" benefit, the home of the insured parties may be located anywhere in the world.

Natural disaster: Any event caused by the abnormal intensity of a natural agent and falling within the scope of [French] Law No. 82-600 of 13 July 1982 when it occurs in *France*.

Common-law spouse: A couple who are neither married, nor in a civil partnership but who can provide proof that they share a *Home* (certificate of partnership or, failing that, council tax, utility bills, insurance, rent receipt, *etc.*) and that they have lived under the same roof since the day of taking out this policy and at the time of the *Claim*.

Departure: Day and time of the planned start of the booked and insured benefits.

Home: The usual place of residence of the insured party. The tax address is regarded as the home in case of a dispute.

Cover period: The cover is assumed by the Insured party according to the scope of the cover defined in the Special Conditions of the policy.

Abroad: Any country with the exception of the country where the Insured party is domiciled.





Europe: Territories of the member states of the European Union, located in geographical Europe, Liechtenstein, the Principalities of Monaco and Andorra, San Marino, Switzerland and the Vatican. The Azores, the Canary Islands and Madeira are not part of this definition.

Event: Any fact that generates harmful consequences, likely to result in the implementation of one or several items covered by the policy.

France: Mainland France (including Corsica), Guadeloupe, Guyana, Martinique, Mayotte, Reunion and St. Bartholomew.

Mainland France: European territory of France (including the islands located in the Atlantic Ocean, the English Channel and the Mediterranean Sea), excluding all overseas areas (departments, regions, communities, territories and countries).

Excess: Amount that remains to be borne by the Insured party in the event of a claim.

Civil War: Armed struggle, within the same state, between different groups identifiable by belonging to an ethnicity, religion, community or ideology, or at least one of these groups opposing the regular armed forces of this state.

Foreign War: Armed engagement, declared or not, of one state with respect to one or several other states or of an irregular and external armed force, motivated, among others, by a geographical, political, economic, racial, religious or environmental dispute.

The Company: Mapfre Asistencia – under the trademark of "Mapfre Assistance, European Travel Insurance" – Travel Assistance Provider and insurer of the risk. This contract is insured by MAPFRE ASSISTANCE Compania Internacional de Seguros y Reaseguros, a public limited company under Spanish law, with a share capital of €96,175,520, whose registered office is located at Sor Angela de la Cruz, 6 – 28020 Madrid, Spain, subject in the context of its business, to control by the Spanish authority Dirección General de Seguros y Fondos de Pensiones, Paseo de la Castellana, 44. 28046 Madrid, acting for the requirements of this policy by means of its French branch whose registered office is located at ZAC de la Donnière 8 – 69970 Marennes, France, registered with the Trade and Companies Register of Lyon under number 413 423 682.

Limit per event: Maximum amount covered for the same event, giving rise to a claim, regardless of the number of insured parties under the policy.

Illness: Any alteration of health confirmed by a doctor of medicine, involving the cessation of any work or other activity requiring appropriate care.

Family members: Legal or common law spouse, ascendants or descendants to the second degree, fathers-in-law, mothers-in-law, sisters, brothers, brothers-in-law, sisters-in-law, sons-in-law and daughters-in-law.

Authorised agency or intermediary: Ski area counters, call centre and websites.

Neighbouring country: Country directly accessible by ski lifts located in mainland France.





Expiry of claims: Period beyond which a claim is no longer admissible.

Trip: Planned place of residence during the validity period of this policy, and organised, sold or supplied by *the Agency or the authorised Intermediary* with which this policy is taken out.

Intervention threshold: Duration, amount or minimum percentage, which releases a payment by the Company's or the implementation of its cover.

Claim: Event involving damages of a nature to release one or several of the cover items taken out.

Policyholder: The signatory to the policy of the insured benefit who, due to this fact, has undertaken to pay the insurance premium.

Subrogation: Action by which the company is substituted in the rights and actions of the Insured party against whoever is responsible for its damages in order to obtain a refund of the amounts that the Company has paid out to the Insured party as a result of a *Claim*.

Territoriality of the policy: The policy cover applies in mainland France and in a neighbouring country (provided that the latter is directly accessible by ski lifts located in mainland France).

Third party: Any natural or legal person, other than the Insured party.

General exclusions

The Company's cover may only be incurred in the following cases:

- Damages of any nature intentionally caused or provoked by the Insured party or with his/her complicity, or resulting from an intentional or malicious failure by the Insured party, except in cases of legitimate self-defence or assistance to a person in danger,
- Suicide or attempted suicide of the Insured party,
- Damage following the consumption of alcohol by the Insured party and/or the absorption by the Insured party of medication, drugs or narcotics, not medically prescribed,
- Unless otherwise specified in the cover, damages resulting from War, Civil or Foreign, acts of terrorism, riots, popular movements, coups, hostage-taking and strikes,
- The civil or military application of a nuclear reaction, i.e. transformations of the nucleus of the atom, the transport and treatment of radioactive waste, the use of a radioactive source or material, exposure to ionising radiation, the contamination of the environment by radioactive agents, an accident or malfunction which occurred on a site operating transformations of the nucleus of the atom,
- The events of which the responsibility could fall either to the organiser of the trip in application of Section 1 of [French] Law No. 2009-888 of 22 July 2009 on the development and modernisation of tourist services, or to the carrier, apart from provisions to the contrary contained in the cover,
- The prohibitions established by local authorities, restriction on the free movement of persons and goods and the closure of an airport or borders.

Obligations in case of claim





When the insurance cover applies, the insured party must:

Notify the Company in writing of any loss of a nature covered within five working days (deadline shortened to two working days in the case of theft).

These deadlines shall run from the knowledge by the insured party of the claim covered. After this time, the insured party will forfeit any right to compensation if the delay has caused injury to the Company.

Forward any information and supporting documentation to the Company (including the original medical documents) as soon as possible.

Spontaneously declare the cover taken out to the Company on the same risk with other insurers.

On our website: www.leassur.com

Alternatively, at our address:

MAPFRE ASSISTANCE
41, rue des Trois Fontanot
92024 Nanterre cedex





OPTION 1

Personal assistance

	Cover ceiling	Excess per person
On and off-piste search and/or rescue costs In mainland France Neighbouring countries Costs of medical transport from the scene:	Up to a limit, per insured person and per claim: Actual cost €15,000 Up to a limit, per insured person and per claim: €300	No fee

Interruption of sport or leisure activity

	Cover ceiling	Excess per person
Compensation in the event of interruption to engaging in the sport or leisure activity: <ul style="list-style-type: none"> - For the ski lifts pass - For skiing lessons 	Payment of an allowance proportional to the number of days of activity not used, up to a limit of: €250 per insured person	€30 per claim

OPTION 2

Cancellation costs

	Cover ceiling	Excess per person
Following the occurrence of an event: <ul style="list-style-type: none"> - For the ski lifts pass - For skiing lessons 	Proportional refund, up to the following limits: €250 per insured person	No fee

Interruption of sport or leisure activity

	Cover ceiling	Excess per



		person
Compensation in the event of interruption to engaging in the sport or leisure activity: <ul style="list-style-type: none"> - For the ski lifts pass - For skiing lessons 	Payment of an allowance proportional to the number of days of activity not used, up to a limit of: €250 per insured person	€30 per claim

Personal assistance

	Cover ceiling	Excess per person
Repatriation assistance: -Organisation and cover of the return of the Insured party to his/her home in Europe or transport to a hospital -Organisation and cover of the return of persons accompanying the insured parties	Actual cost Actual cost	No fee
Refund of emergency medical expenses following an accident during a sport or leisure activity in mainland France: -Medical expenses -Hospitalisation expenses	Up to a limit, per insured person and per claim €1,500 for nationals or permanent residents in France (for more than 3 consecutive months) €3,000 for non-residents	Per insured person: €40
On and off-piste search and/or rescue costs <ul style="list-style-type: none"> - In mainland France - Neighbouring countries 	Up to a limit, per insured person and per claim: Actual cost €15,000	No fee
Costs of medical transport from the scene:	Up to a limit, per insured person and per claim: €300	No fee
Assistance in the event of the death of an insured person: -Transporting the body -Funeral expenses -Additional transport costs of insured members of the family of the deceased or of	Actual cost Up to a limit, per insured person of €2,300 Actual cost	No fee

<p>an insured person</p> <p>-Payment of expenses permitting a family member to travel to the remains of the insured party: Roundtrip Costs of accommodation on-site until the body is repatriated</p>	<p>Actual cost Up to a limit, per day and per person, of €50 for a maximum of 10 days</p>	
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OPTION 3

Cancellation costs

	Cover ceiling	Excess per person
<p>Following the occurrence of an event:</p> <ul style="list-style-type: none"> - For the ski lifts pass - For skiing lessons 	<p>Proportional refund, up to the following limits: €250 per insured person</p>	<p>No fee</p>

Interruption of sport or leisure activity

	Cover ceiling	Excess per person
<p>Compensation in the event of interruption to engaging in the sport or leisure activity:</p> <ul style="list-style-type: none"> - For the ski lifts pass - For skiing lessons 	<p>Payment of an allowance proportional to the number of days of activity not used, up to a limit of: €250 per insured person</p>	<p>€30 per claim</p>

Personal assistance

	Cover ceiling	Excess per

		person
Refund of emergency medical expenses following an accident during a sport or leisure activity in mainland France: -Medical expenses	Up to a limit, per insured person and per claim €1,500 for nationals or permanent residents in France (for more than 3 consecutive months)	Per insured person: €40
On and off-piste search and/or rescue costs - In mainland France - Neighbouring countries	Up to a limit, per insured person and per claim: Actual cost €15,000	No fee No fee
Costs of medical transport from the scene:	Up to a limit, per insured person and per claim: €300	No fee

CANCELLATION COSTS

The cover applies to trips, for a maximum period of 21 consecutive days, sold by the Agency or by the authorised Intermediary with which this policy is taken out.

Specific definitions for the cover

Cancellation: fixed and final discontinuance by the Insured party, of all of the insured benefits, formulated with the Agency or the authorised Intermediary.

Progress check: new medical consultation and/or conducting of additional medical examinations.

Nature of the cover

For passes booked and paid for online more than 48 hours prior to their date of use, the company covers the refund of the ski lift pass and of one or more ski lessons following the occurrence of any of the events listed in Article 3 "Events covered in case of cancellation", formally preventing the Insured party from taking part in the activity covered.



Events covered in case of cancellation

The Cancellation must be consecutive to the occurrence, after taking out the insurance, of one of the following events formally preventing the Insured party from departing

Medical events:

An illness, including related to pregnancy, an Injury, which must involve:

- ✓ Either, a hospitalisation from the day of the Cancellation until the day of departure,
- ✓ Or, the cessation of any professional activity, or staying at home if the person does not work, from the day of the Cancellation until the day of departure,
- ✓ And a medical consultation, as well as taking a drug treatment from the day of the Cancellation or the conducting of medical examinations prescribed by a doctor,
- ✓ And in all cases, cover for all these acts by one of the health insurance bodies to which the Insured party is affiliated,

Occurring at the home of:

- ✓ The Insured party, his/her spouse, common-law spouse, or partner of a civil partnership, direct ascendants or descendants, as well as those of their spouse, common-law spouse, or partner of a civil partnership,
- ✓ Their brothers, sisters, brothers-in-law, sisters-in-law, sons-in-law, daughters-in-law, fathers-in-law, mothers-in-law, legal guardian, as well as a person under their guardianship.

IMPORTANT:

The Insured party is responsible for proving that all the conditions for the implementation of the cover laid down have been met at the time of Cancellation. The Company may refuse the request, if the Insured party cannot provide the requested supporting documentation.

Family events:

The death of:

- ✓ The Insured party, his/her spouse, common-law spouse, or partner of a civil partnership, direct ascendants or descendants, as well as those of their spouse, common-law spouse, or partner of a civil partnership,
- ✓ Their brothers, sisters, brothers-in-law, sisters-in-law, sons-in-law, daughters-in-law, fathers-in-law, mothers-in-law, legal guardian, as well as a person under their guardianship.

In addition, on the condition that the home of the deceased is not the destination location of the insured benefit.

Cover limit





The Company shall refund, up to the limit of the amounts indicated in the Table of Cover, the amount of the ski lift pass and/or skiing lessons.

The refund may not exceed the limit per person and per event indicated in the table of cover.

Exclusions

Any events not listed in Article 3 "Events covered in case of cancellation" are excluded.

In addition to the exclusions set out in the General Conditions, cancellations resulting from the following are not covered:

- ✓ Illnesses or injuries which have been identified for the first time, a treatment, a relapse, a worsening or a hospitalisation between the trip booking date and the date of taking out this insurance policy,
- ✓ Illnesses which have been identified for the first time, a development, a supplementary examination or a change of treatment in the 30 days prior to booking the insured benefit,
- ✓ Injuries which have occurred or taken place following a surgical act, rehabilitation, an additional examination or a change of treatment in the 30 days prior to booking the insured benefit,
- ✓ Eardrum disorders, gastric and/or intestinal disorders, spinal disorders, in the absence of a progress check by a doctor within 15 (fifteen) days following the first medical consultation which led to the Cancellation,
- ✓ Illnesses related to pregnancy beyond the 28th week, voluntary interruption of pregnancy, in vitro fertilisation,
- ✓ Medical contraindications to the trip not following on from an illness, including related to pregnancy, or an injury, according to the conditions set out in Article 3,
- ✓ Lack of vaccination or preventive treatment necessary for the destination of the insured benefit
- ✓ The refusal of paid leave by the employer,
- ✓ Epidemics, the local health situation, natural or human pollution,
- ✓ Natural disasters occurring Abroad whose determining cause is the abnormal intensity of a natural agent and those forming the subject of the procedure referred to in [French] Law No. 82-600 of 13 July 1982,
- ✓ Criminal proceedings which the insured party would be the subject of,
- ✓ Any covered event occurring between the Trip booking date and the date of taking out this policy,

Obligations in case of claim

The insured party must:





Notify the travel agency or the authorised Intermediary of their discontinuance of the occurrence of a covered event preventing departure,

Report the claim to GRITCHEN AFFINITY within five working days becoming aware of it, unless unforeseen circumstances or a force majeure occur. After this deadline, if GRITCHEN AFFINITY suffers an injury due to the fact of late declaration, the Insured party shall lose any right to compensation.

Supporting documents to be provided

GRITCHEN AFFINITY will notify the Insured party of the information necessary to carry out the claim declaration. The Insured party will be responsible for providing GRITCHEN AFFINITY with any document and information to justify the reason for the Cancellation and to assess the amount of his/her compensation.

If the reason for the Cancellation is medical, the Insured party may, if s/he wishes, provide the medical elements, in a confidential envelope, for the attention of the GRITCHEN AFFINITY medical officer.

The insured party must provide:

IN ALL CASES:

The booking confirmation of the insured benefits,
A copy of his/her ski pass mentioning the insurance,
The bill for the cost of cancelling the insured benefits,
Where appropriate, the official document specifying the link of kinship with the person at the origin of the Cancellation (copy of the family record book, certificate of cohabitation, *etc.*),
Bank details (SWIFT/IBAN),
After examining the file, any other supporting documents at the request of GRITCHEN AFFINITY

IN CASE OF ILLNESS, including related to pregnancy, or injury:

If applicable, prescriptions for drug treatment,
Where appropriate, a record of the examinations,
Where appropriate, a copy of the work stoppage,
Where appropriate, a hospital report,
After examining the file and at the request of *the Insurer*: the refund vouchers from the health insurance body to which *the Insured party* is affiliated.

IN THE EVENT OF DEATH:

A copy of the death certificate,





Where appropriate, the details of the notary in charge on the deceased Insured party's estate.

PERSONAL ASSISTANCE

The cover applies to trips, for a maximum period of one day or a maximum of 21 consecutive days, for trips and sold by the *Agency or the authorised Intermediary* with which this policy is taken out.

Specific definitions for the cover

Ski Area: Set of slopes including marked pistes, defined by a municipal decree, and the off-piste area.

Costs of medical transport from the scene: Medical transport from the scene is that occurring between the place of the occurrence of the accident and the nearest medical centre or hospital and best suited to the nature of the injuries, and return to the place of stay in the injured person's resort.

Search costs: Costs of operations carried out by civilian or military rescuers or specialist government or private agencies, travelling specifically for the purpose of searching for the Insured party in a place devoid of any organised or nearby means of rescue.

Rescue costs: Transport costs following an Accident (when the Insured party is located) from the point where the Accident occurs to the nearest medical facility.

Off-piste board sports: Engaging in a board sport on snow in unmarked, unsupervised areas, not prepared by the safety services of the winter sport resorts

Immobilisation: Total stay at Home or at the place of residence of the trip, due to a visit from a doctor and the issuance of a medical certificate.

Nature of the cover

When you call **The Company's** emergency centre, the decisions relating to the nature, desirability and organisation of the measures to be taken shall be the exclusive responsibility of **The Company**.

- ✓ **On-piste search and/or rescue costs:**





In the context of engaging in his/her sporting or leisure activity, **The Company** shall bear the search and/or costs corresponding to the operations put in place upon the disappearance or an Injury of the Insured party, up to the limit of the ceiling listed in the Table of Cover.

✓ **Off-piste search and/or rescue costs:**

When the Insured party engages in off-piste board sports, **The Company** shall bear the Search costs and/or the Rescue costs incurred, up to the limit of the ceiling listed in the Table of Cover.

This benefit is only acquired when the Insured party remains in the *Ski Area*.

✓ **Costs of medical transport from the scene:**

In the context of engaging in his/her sport or leisure activity, **The Company** shall bear up to the limit of the ceiling listed in the Table of Cover, the medical transport costs of the Insured party from the place of occurrence of the accident to the nearest medical centre or hospital and best suited to the nature of the injuries, and his/her return to the place of residence in the resort of the Insured party.

ASSISTANCE DURING THE TRIP

When the Insured party calls The Company's emergency centre, the decisions relating to the nature, opportunity and organisation of the measures to be taken shall be the exclusive responsibility of The Company.

Assistance in case of Illness, Injury or death of the Insured party (if Option 2 or 5 is taken out):

Repatriation Assistance

If the Insured party's state of health requires repatriation, The Company shall intervene in the following manner:

Organisation and cover of the return of the Insured party to his/her Home or their transport to a hospital

The Company organises and covers the costs of the return Home of the Insured party in Europe or transport to the hospital nearest to home and/or most suited to provide the care required by his/her state of health.

In this case, if the Insured party so wishes, The Company can then organise his/her return Home in Europe, as soon as his/her state of health permits.

Organisation and cover of the return of a person accompanying the Insured party





When the repatriation of the Insured party has taken place more than 24 hours before the date of his/her initial return, The Company shall organise and cover, after agreement from its medical department, the return Home of one of the insured persons who was traveling with Insured party, provided that the means originally planned for his/her return trip cannot be used or changed.

IMPORTANT:

The decisions are only taken in consideration of the medical interest of the Insured party and are exclusively made by **The Company's** doctors, in agreement with the local treating doctors.

The Company's Doctors shall contact the medical facilities on site and, if necessary, the Insured party's usual treating doctor, in order to gather the information to make the decisions best suited to his/her state of health.

The repatriation of the Insured party is determined and managed by medical personnel with a qualification legally recognised in the country where this medical personnel usually exercises his/her professional activity.

Only, the medical interest of the Insured party and the respect of the health regulations in force, are taken into consideration to stop the decision over transport, the choice of the means of transport and the choice of the place of any hospitalisation.

If the Insured party refuses to follow the decisions taken by **The Company**, **The Company** waives any liability in relation to the consequences of such an action, in particular in cases of returning by its own means or even in the event of a worsening of his/her state of health, and loses any right to benefits and compensation from **The Company**.

In addition, **The Company** may in no case be a substitute for local emergency rescue agencies.

- ✓ **Refund of emergency medical expenses following an accident during a sport or leisure activity in mainland France (if Option 2, 3, 4 or 5 is taken out):**

The Insured party shall pay the costs of medical care or hospitalisation on medical advice in mainland France, following a covered accident:

The Company shall refund the costs of medical care and hospitalisation following an accident during his/her sport or leisure activity, undertaken at the resort or in the nearest healthcare facilities and the Insured party shall bear the costs after the intervention of Social Security and/or of any other insurance or welfare agency, amounting to

200% of the standard Social Security scale of charges, up to the limits laid down in the Table of Cover.

The Company shall also refund walking sticks, orthopaedic vests, neck braces, plaster casts, bandages and splints up to a maximum of 50% of the actual cost, and up to the limit





of costs remaining at the expense of the *Insured party* after the Social Security, mutual insurance or any insurance or welfare agency has intervened. This cover is acquired in the same limits in case of a total refusal to refund by the Social Security institution.

✓ **Hospitalisation costs (if Option 2, 4 or 5 have been taken out):**

In the case of hospitalisation in a hospital with which **The Company** has a payment agreement, **The Company** may, at the request of the Insured party, advance the hospitalisation costs by direct payment to the hospital.

In this case, the Insured party undertakes to repay this advance within a period of three months from the date of their return. After this time, **The Company** will be entitled to demand, in addition, legal costs and interest.

The Company reserves the right to require that a third person acts as guarantor of the refund in advance, within 3 months from the provision of the amounts, by depositing a certified bank cheque at its registered office or an acknowledgment of debt for an equivalent amount.

The Insured party's right to a refund ceases on the day of his/her medical repatriation or return home. Only the care provided in the healthcare facilities closest to the resort where the Insured party is engaging in skiing and the most suited to their health condition, may be the subject of a refund. In order to take advantage of the cover, the Insured party must submit his/her refund request to the agencies on which you depend (Social Security, mutual insurance, insurance or welfare agency). **The Company** is only required to refund, up to the cover ceilings of this policy, the difference between the actual costs incurred and the costs covered by the various agencies, on which the Insured depends (Social Security, mutual insurance, insurance or welfare agency).

✓ **Assistance in case of death of the Insured party (if Option 2 or 5 is taken out):**

In case of death of the Insured party, **The Company** shall organise and pay for:

The transporting of the body from the place of being put in the coffin to the funeral parlour at the Home of the deceased or his/her family in Europe,

The funeral expenses, up to the limit of the ceiling contained in the Table of Cover,

The additional transport costs of insured members of the family of the deceased or of an insured person accompanying him/her, to the extent where the means initially planned for their return in Europe can no longer be used because of this death.

The expenses permitting a family member to travel to the remains of the Insured party.

When the Insured party dies while alone at their place of stay or accompanied by minor children, and/or if the presence of a member of his/her family on site is necessary to identify the body and/or for the burial or repatriation of the body formalities:

The Company shall organise and pay for the roundtrip of a member of his/her family remaining in Europe in order to accompany the body,





The Company shall refund, on presentation of supporting documents and up to the limit of the amount listed in the Table of Cover, the proven accommodation costs of this person until the day of repatriation of the body.

Exclusions

In addition to the exclusions common to all cover, the following are also excluded:

- ✓ **Costs incurred without The Company's prior agreement,**
- ✓ **The consequences of the events that occurred in countries excluded from this policy,**
- ✓ **The consequences of pre-existing illnesses or injuries, diagnosed and/or treated, as well as any comfort surgical operations having been the subject of an on-going hospitalisation, by day or ambulatory, in the 6 months prior to the request for assistance,**
- ✓ **The consequences of an unconsolidated disorder undergoing treatment, for which the Insured party is in convalescence, as well as disorders occurring during a trip undertaken with the purpose of diagnosis and/or treatment,**
- ✓ **Any consequences (control, additional treatments, relapses) of a disorder which gave rise to a previous repatriation,**
- ✓ **The organisation and payment of the transport referred to in Article 2 "Costs of medical transport from the scene" for mild disorders or lesions which can be treated on site and that do not prevent the Insured party from continuing his/her trip,**
- ✓ **Voluntary interruption of pregnancy, childbirth, in-vitro fertilisation and their consequences, as well as pregnancies which have given rise to hospitalisation in the 6 months preceding the request for assistance,**
- ✓ **The consequences of situations with an infectious risks in an epidemic context, of exposure to infectious biological agents, chemical warfare gas type agents, incapacitating agents, or nerve agents or with long-lasting neurotoxic effects, which are subject to quarantine or preventive measures or specific monitoring by the local and/or national health authorities of the country the Insured party is visiting,**
- ✓ **The participation of the Insured party in any sport engaged in professionally or under contract with pay, as well as preparatory training,**
- ✓ **The non-observance by the Insured party of official restrictions, as well as the non-compliance by the Insured party with official safety rules, related to the practice of a sport activity,**
- ✓ **The consequences of an accident that occurred while the Insured party is engaging in an aviation sport or one of the following sports: skeleton, bobsleigh, ski jumping, climbing to more than 3,000 m, rock climbing, caving, bungee jumping or parachuting,**
- ✓ **Expenses not specifically mentioned, which give rise to a refund, as well as any expenditure for which the Insured party is unable to produce documentary evidence,**
- ✓ **The consequences of any air transport incident booked by the Insured party, operated by a company listed on the black list established by the European Commission, whatever its origin and its destination.**

ADDITIONAL EXCLUSIONS IF OPTION 2, 3, 4 or 5 IS TAKEN OUT

In addition to the exclusions common to all cover and the exclusions mentioned in Article 3, the following are also excluded:





As a Refund of medical expenses following a skiing accident, the following are also excluded:

- ✓ **The costs for spa treatments, heliotherapy, weight loss, any "comfort" or cosmetic treatment, the costs of a physiotherapist, as well as the costs of care or treatment not the result of a medical emergency,**
- ✓ **The costs of implant, internal prosthetic, optical, dental, acoustic, functional or other devices, as well as the costs of any equipment,**
- ✓ **The vaccination costs,**
- ✓ **The costs resulting from care or treatment whose therapeutic nature is not recognised by French legislation,**
- ✓ **For non-French residents, the costs incurred in the country where the Insured party is domiciled or in the country of which s/he is a citizen; the costs of special rooms as well as ancillary hospitalisation costs such as a TV, telephone and other non-medical benefits.**

Obligations in case of claim

For a request for assistance (On and off-piste search and or rescue costs/Costs of medical transport from the scene):

The Insured party or a third party must contact Gritchen Affinity.

A file reference will be immediately assigned to him/her and s/he will notify the assistance coordinator of:

- ✓ His/her policy number,
- ✓ A copy of his/her pass mentioning the option taken out,
- ✓ His/her address and telephone number where s/he can be reached, as well as the details of the people who are looking after him/her.

Also, the Insured party must allow The Company doctors to access to any medical information which concerns him/her, or which relates to the person who requires The Company's intervention.

For a request for assistance (Repatriation home/Assistance in case of death/Return of companions):

The Insured party or a third party must contact The Company
Company's Support Centre

Open 24 hours a day:

From abroad: Tel: 00 33 1 46 43 50 20 Fax: 00 33 1 46 43 50 26

From France: Tel: 01 46 43 50 20 Fax: 01 46 43 50 26

A file reference will be immediately assigned to him/her and s/he will notify the assistance coordinator of:

- His/her policy number,
- A copy of his/her pass mentioning the option taken out,
- His/her address and telephone number where s/he can be reached, as well as the details of the people who are looking after him/her,





Also, the Insured party must allow The Company doctors to access to any medical information which concerns him/her, or which relates to the person who requires The Company's intervention.

For a refund request (medical expenses, hospitalisation costs):

In order to qualify for a refund of costs paid in advance by the Insured party with The Company's agreement, the Insured party must send The Company all the supporting documents to establish the merits of his/her claim.

Benefits that have not been previously requested and which have not been organised by The Company's services, shall not lead to the entitlement to a refund or a compensatory allowance.

Supporting documents to be provided

According to the assistance benefits being implemented, **The Company** will notify the Insured party of the supporting documents to provide in support of his/her request:

The Insured party must provide:

IN ALL CASES:

A copy of his/her ski pass mentioning the insurance,
Any other supporting documents at the request of **The Company**

IN CASES OF PERSONAL ASSISTANCE:

If applicable, the death certificate,
If applicable, a copy of an official administrative document justifying the link of kinship with the beneficiary.

IN THE CASE OF A REFUND OF MEDICAL COSTS:

Bank details (SWIFT/IBAN),
A copy of the medical expenses bill paid by the Insured party,
A copy of the Social Security refund voucher,
The original of mutual insurance company refund voucher,
After examining the file, any other supporting documents at the request of **The Company**

PAYMENT OF THE SEARCH/RESCUE COSTS AND/OR AMBULANCE COSTS:

A copy of his/her ski pass mentioning the insurance,
Any other supporting documents at the request of **The Company**

*** In the absence of documentary evidence, the Company reserves the right to charge back the costs incurred and to ask the Insured party to repay these expenses.**





Interruption of sport or leisure activity

NATURE OF THE COVER

The Company shall cover up to the limits laid down in the Table of Cover, the payment of an allowance proportional to the number of days of the unused sport or leisure activity pass, when the Insured party has to interrupt engaging in the sport or leisure activity insured under this policy for one of the following events:

- An illness or injury of the Insured party preventing him/her from engaging in the insured sport or leisure activity,
- The early return of the Insured party organised by an assistance company.

COMPENSATION PROCEDURES

Compensation is proportional to the number of unused days of the sport or leisure activity pass.

It is due from the date following the total stoppage of the covered activities.

It is calculated based on the total price per person for the sport or leisure activity pass, and up to the ceiling contained in the Table of Cover.

The basis for calculating the compensation varies according to the type of benefit insured:

- **For the ski lift passes:**

The Company shall refund the ski lift pass, up to the limits laid down in the Table of Cover, if the accident occurs before 2:00 p.m. or during the first half of the validity period of the transport ticket, with proof of an intervention performed by the resort's rescue services.

- **For skiing lessons:**

The Company shall refund days and ski lessons insured and not used up to the limits laid down in the Schedule of Amounts and Cover, *pro rata temporis*, on the day after one of the events listed in Article 1 "Nature of the cover":

- o Accident on the ski area during the opening hours of the ski lifts; with medical supporting documents.
- o Illness with an unexpected hospitalisation of the insured person, for more than 24 consecutive hours, involving the cessation and the prohibition of skiing until the end of the trip

Any administrative costs, tips, the insurance premium, as well as refunds or compensations awarded by the Agency or the authorised Intermediary with which the Insured party has purchased its sport or leisure activity pass will be deducted from the compensation.





EXCLUSIONS

In addition to the exclusions common to all cover, the consequences of the following circumstances and events are also excluded:

-Any events not stipulated in Article 1 "Nature of the cover".

OBLIGATIONS IN CASE OF A CLAIM

Before the organisation of his/her possible return, the Insured party must ask **Gritchen Affinity** to obtain prior agreement to interrupt his/her sport or leisure activity:

S/he will then receive a file reference.

Then, the Insured party must carry out its request for a refund of unused benefits due to this interruption from **Gritchen Affinity**

SUPPORTING DOCUMENTS TO BE PROVIDED

Gritchen Affinity will notify the Insured party of the information necessary to carry out the claim declaration. The Insured party will be responsible for providing **Gritchen Affinity** with any document and information to justify his/her request and the assessment of the amount of his/her damage.

The insured party must provide:

- **IN ALL CASES:**
 - The bill for the sport or leisure activity,
 - Bank details (SWIFT/IBAN)
 - The file reference for which the Insured party obtained the agreement to terminate the trip by **Gritchen Affinity**,
 - After examining the file, any other supporting documents at the request of **Gritchen Affinity**.

- **FOR THE SKI-PASS/SKI LESSONS:**
 - The accident declaration form, available at the ski lift cashiers or at the resort's piste services,
 - A medical certificate,Or
 - The file reference for which the Insured party obtained the agreement to terminate the trip by **Gritchen Affinity**,Or
 - Proof of the intervention of another assistance company stating the reason for the intervention,
 - Any other supporting documents at the request of **Gritchen Affinity**.



