

GENERAL & SPECIAL
CONDITIONS



INSURANCE MULTISPORT ASSUR

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In case of legal problems with this contract, only the French version will be taken into consideration.

POLICY No.

STANDARD MULTI-SPORTS INSURANCE

THE ADMINISTRATIVE MANAGEMENT OF THIS CONTRACT HAS BEEN ENTRUSTED TO ASSUREVER, INSURANCE BROKER, REGISTERED WITH ORIAS (REGISTER OF INSURANCE INTERMEDIARIES) UNDER NUMBER: 07 028 567 (WWW.ORIAS.FR).

ASSUREVER LEGAL MENTIONS: https://public.assurever.com/Mentions_legales.jpg.

ASSUREVER IS SUBJECT THE SUPERVISION OF THE FRENCH PRUDENTIAL CONTROL AUTHORITY (ACPR), LOCATED AT 4 PLACE DE BUDAPEST - CS 92459 - 75436 PARIS CEDEX 09, FRANCE.

THE COVERAGE PROVIDED BY YOUR CONTRACT, WITH THE EXCEPTION OF ASSISTANCE SERVICES, IS GOVERNED BY THE FRENCH INSURANCE CODE.

YOUR CONTRACT INCLUDES THE PRESENT GENERAL TERMS AND CONDITIONS, COMPLETED BY YOUR SUBSCRIPTION CERTIFICATE. AMONG THE COVERAGE DESCRIBED HEREAFTER, THE COVERAGE YOU HAVE PERSONALLY SELECTED IS INDICATED IN YOUR SUBSCRIPTION CERTIFICATE, ACCORDING TO THE FORMULA TO WHICH YOU HAVE SUBSCRIBED AND FOR WHICH YOU HAVE PAID THE CORRESPONDING PREMIUM.

PLEASE READ YOUR GENERAL TERMS AND CONDITIONS CAREFULLY. THESE INDICATE OUR RESPECTIVE RIGHTS AND OBLIGATIONS AND PROVIDE ANSWERS TO QUESTIONS YOU MAY HAVE.

IMPORTANT

Should an event occur that is likely to result in the cancellation of your trip, you must cancel your booking with the travel agent as soon as you become aware of the situation.

In order to be eligible for the "Travel Cancellation" cover or any other insurance cover in this policy, you must submit your claim form within five working days following the date of the event, to:

ASSUREVER
Service Gestion Clients
TSA 52216
18039 BOURGES CEDEX
Tél. : +33 1 73 03 41 01
Mail : gestion@assurever.com

To be eligible for the insurance cover detailed in this policy, before taking any action or personal initiative, you **MUST** first contact the emergency services and then contact MUTUAIDE Assistance in order to obtain a claim number, without which no action can be taken.

Your policy : **9291**

MUTUAIDE Assistance 24h/24 and 7d/7

Telephone number from France: **01 55 98 88 17**

Telephone number from abroad: **+33 1 55 98 88 17**

TABLE OF LIMITS OF COVER (SPECIAL CONDITIONS)

BENEFITS	AMOUNTS INCL. TAX maximum per person
Cancellation <ul style="list-style-type: none">• Serious illness, serious sport-related accident requiring hospitalization• Death resulting from a sports accident<ul style="list-style-type: none">↳ Excess	<ul style="list-style-type: none">• €400 per person• €50 per person
Sanitary Protection Cancellation <ul style="list-style-type: none">• Serious illness in case of epidemic or pandemic• Cancellation in the event of lack of vaccination against Covid 19• Cancellation for refusal on boarding at the airport, train station, bus station or departure ferry terminal following a temperature check<ul style="list-style-type: none">↳ Excess	<ul style="list-style-type: none">• €400 per person• 20% of the amount of cancellation fees with a minimum of €50 per person
Interruption of trip <ul style="list-style-type: none">• Following repatriation	<ul style="list-style-type: none">• €400 per claim
Breakage of skis, snowboards, windsurfing, surfing <ul style="list-style-type: none">• Breakage of personal sports equipment (rental costs)	<ul style="list-style-type: none">• 8 days (market value greater than or equal to €100 at the time of the loss)

Personal civil liability whilst abroad

- Physical injury, material and immaterial:
 - Including consequential material and immaterial damage with an absolute excess of €150 per claim
 - Defense in civil, commercial or administrative courts. Defense of civil interests in criminal courts
- ↳ *Franchise*
- €750,000 maximum per claim
 - €750,000 per claim
 - Costs payable by the Insurer, unless the cover limit in question is exceeded
 - €500

Individual accident

- Accidental death benefit
 - Permanent accidental disability capital
- Maximum per event
- ↳ *Relative excess*
- €10,000 maximum per person
 - €10,000 maximum per person reducible in the event of permanent disability according to the Social Security's Accidents at Work scale
 - €200 000
 - *Any accident covered under this contract resulting in a partial permanent disability of 30% or less will not give rise to the payment of any indemnity*

Repatriation Assistance

- Repatriation or Medical transport
 - Repatriation of accompanying persons
 - Visit from a relative
 - Medical expenses related to sport
 - Search and rescue costs
- Repatration of the body in case of death
- Funeral expenses
- Advance payment of criminal bail
- Actual costs
 - Return ticket
 - Round-trip ticket
 - €5,000 per person
 - €50,000 per event and €1,200 towing of surf, windsurf, jet ski
 - €3,000
 - €1,000
 - €7,500

Assistance Sanitary Protection

- Pre-departure teleconsulting
 - Repatriation or sanity transport (including epidemic or pandemic)
 - Impossible return
- Hotel expenses due to impossible return
- Hotel expenses following quarantine
- Medical expenses abroad including epidemic or pandemic
- ↳ *Excess*
- Taking charge of a local telephone package
 - Psychological support
 - Substitute suitcase
- Home help
- Delivery of household goods
- Psychological support following repatriation
- 1 call
 - Actual costs
 - €1,000 maximum per person and €50,000 maximum per group
 - Hotel costs €150 per night (maximum 14 nights)
 - Hotel costs €150 per night (maximum 14 nights)
 - €150,000 per person
 - €30 per person
 - Up to €80
 - 6 consultations per event
 - €100 maximum per person and €350 maximum per family
 - 15 hours spread over 4 weeks
 - 1 delivery per week (maximum 2 weeks)
 - 6 interviews per event

EFFECTIVE DATES AND DURATION OF COVER

GUARANTEES	DATE OF EFFECT	EXPIRY OF COVER
CANCELLATION OF TRIP	The day of subscription to this insurance policy	The departure date (place of convocation of the organizer on the outward journey)
OTHER COVERS	The departure date (place of convocation of the organizer on the outward journey)	The last day of the trip (place of dispersal of the group)

The duration of validity of all cover corresponds to the dates as indicated in the Special Provisions up to a maximum of 365 consecutive days, with the exception of:

- The "Cancellation of Trip" cover which takes effect on the date of taking out this insurance policy and expires as soon as the last insured benefit has commenced.

Only the cover taken out and as specified in the Special Provisions is provided.

Cover must be taken out on the date of booking the trip or at the latest on the day preceding the date of application of the cancellation penalties specified in the travel operator's schedule..

THE INSURANCE AND ASSISTANCE IN GENERAL

This document determines the Insurance and Assistance guarantees that will be guaranteed and provided by the Insurer to Members/Beneficiaries of the **Standard Multi-sports** contract.

The purpose of this insurance and assistance contract is to guarantee, within the limits and conditions defined below, the Insured on the occasion and during his trip.

Like any insurance and assistance contract, this one has rights for you and for us, but also obligations. It is governed by the Insurance Code. These rights and obligations are set out in the following pages.

DEFINITIONS

Abroad

The term "Abroad" means the whole world with the exception of your country of Domicile and the countries excluded.

Accidental death

Death not linked to an illness, but to an accident during the practice of private sports and resulting from the sudden action of an external, unforeseeable and sudden cause.

Application fields

The guarantees are valid only within the framework of the practice of sporting leisure on a private basis during the period of validity of the contract mentioned on the Membership certificate.

Attentat

Any act of violence, constituting a criminal or illegal attack, against persons and/or property, in the country in which you are staying, with the aim of seriously disturbing public order through intimidation and terror, and causing the subject of media coverage. This "attack" will have to be recorded by the French Ministry of Foreign Affairs or the Ministry of the Interior. If several attacks take place on the same day, in the same country, and if the authorities consider it as one and the same coordinated action, this event will be considered as one and the same event.

Cancellation

The pure and simple cancellation of the trip you have booked, following the reasons and circumstances leading to the application of the "Trip Cancellation" guarantee, which are listed in the "Trip Cancellation" chapter.

Contribution

The Premium is payable in advance on subscription for the duration of the guarantee chosen. Taxes at the current rate are included in the Contribution.

Duration of guarantees

The **Standard Multi-sports** policy takes effect on the effective date mentioned on the Membership certificate, under the heading "Membership", 0 hours, or at the time and on the date mentioned on the Membership certificate, under the "membership date" section if the latter is identical to the effective date of the guarantees under the "Membership" section, subject to receipt of the Contribution.

It ceases on the date mentioned on the Membership certificate and no later than 12 months after it takes effect. Under no circumstances may the entry into effect be prior to the date of membership and payment of the Contribution. It is up to the Member/Beneficiary to check that his Contribution has been collected by the Insurer via the Subscriber.

Epidemic

Abnormally high incidence of a disease during a given period and in a given region.

Event

Any situation provided for by these General Provisions at the origin of a request for intervention with the Insurer.

Excess

Part of the indemnity remaining the responsibility of the Policyholder/Beneficiary.

Geographic coverage

The guarantees of the **Standard Multi-sports** contract apply worldwide, **excluding countries in a state of civil or foreign war, notorious political instability, undergoing popular uprisings, riots, attacks, acts of terrorism, piracy, reprisals, restriction on the free movement of people and goods (whatever the reason, in particular health except stipulation in the guarantee, security, meteorological...) or disintegration of the atomic nucleus.**

Hospitalization

Any admission of an Insured justified by a hospitalization certificate in a hospital center (hospital or clinic) prescribed by a doctor, following an Illness or an Accident and including at least one night on site.

Illness

Sudden and unpredictable deterioration of health identified by a competent medical authority.

Insurer

- For Assistance and Insurance cover excluding Private Life Civil Liability Abroad, the Insurer is MUTUAIDE ASSISTANCE – 126 rue de la Piazza – 93196 Noisy-le-Grand Cedex – S.A. with capital of €12,558,240 fully paid – Company governed by the Insurance Code RCS 383 974 086 Bobigny – VAT FR 31 3 974 086 000 19.
- For Private Life Civil Liability coverage Abroad, the Insurer is TOKIO MARINE EUROPE SA (TOKIO MARINE HCC) under policy number 35.806.460. For this cover, the Insured must be domiciled in mainland France or Overseas Department and have taken out this policy through a tour operator or travel agency.

Maximum per event

Where the same cover operates in favour of more than one insured victim of the same event and insured under the same Special Provisions, cover is limited in all cases to the maximum under that head of cover, regardless of the number of victims. The claim will be accordingly reduced and paid in proportion to the number of victims.

Member of the family

By Family Member, we mean the spouse, PACS or common-law partner living under the same roof, the legitimate, natural or adopted child(ren) of the Insured, the father and the mother, the brothers and sisters, the grandparents, the grandchildren, the parents-in-law (namely the parents of the Insured's spouse), the legal guardian, the brothers-in-law and sisters, sons-in-law and daughters-in-law, uncles and aunts, nephews and nieces.

Member

Any natural person over the age of 18 or any legal entity having subscribed to the **Standard Multi-sports** contract and having received in return a Membership certificate.

Member(s) / Beneficiary(ies)

- In the context of an individual subscription: the Subscriber/Beneficiary mentioned on the Certificate of subscription.
- As part of a family subscription: the Subscriber/Beneficiary, his or her spouse or partner or PACS partner and/or his legitimate, natural or adoptive children under the age of 18* under his tax responsibility, and living under the same roof, and mentioned on the membership certificate.
* *The age of each Beneficiary is assessed on January 1 of each year by the difference in vintage between the year of birth and the current year.*
- As part of a group subscription: The Subscriber/Beneficiary, members of the same association, the same club, or the same family, or employees of the same employer, practicing the same sporting activity, for the same dates, at the same place and under the same conditions mentioned on the Membership Certificate.

Membership certificate

Document given to the Member/Beneficiary after receipt of the application for membership, payment of the Premium and acceptance by the Insurer.

Native country

Is considered as the native country that of your Domicile.

Natural disaster

Phenomenon of natural origin, such as an earthquake, a volcanic eruption, a tidal wave, a flood or a natural cataclysm, caused by the abnormal intensity of a natural agent, and recognized as such by the public authorities of the country of occurrence.

Pandemic

Epidemic that develops over a vast territory, transcending borders and qualified as a pandemic by the World Health Organization (WHO) and/or by the competent local public authorities of the country where the disaster occurred.

Quarantine

Isolation of the person, in the event of suspected illness or proven illness, decided by a competent local authority, in order to avoid the risk of spreading the said illness in the context of an epidemic or pandemic.

Residence

The main and usual place of residence of the Policyholder/Beneficiary.

Serious illness

Sudden and unpredictable deterioration of health identified by a competent medical authority leading to the prescription of medication and including the interruption of all professional or other activities.

Serious injury accident

Sudden deterioration in health resulting from the sudden action of an unintentional external cause on the part of the victim noted by a competent medical authority resulting in the issuance of a prescription for taking medication for the benefit of the patient and involving the cessation of any professional or other activity.

Sinister

Random event, likely to engage the guarantees of the **Standard Multi-sports** contract.

Sports guaranteed

All sports as defined in Appendix 1 of this information notice to the contract **unless mentioned in Common Exclusions and/or in Appendix 1 of this information notice.**

Spouse

Spouse means:

- a person married to the Insured Person and not legally separated;
- a person living as if married with the Insured Person, in the same household and with the same common interests as a married couple;
- the co-signatory of a civil union with the Insured Person.

TERRITORIAL APPLICATION OF COVER

Cover applies worldwide.

The following are excluded: countries identified by the French Ministry of Foreign Affairs as being in a state of civil or foreign warfare, known political instability, suffering reprisals, restrictions to the free movement of persons and goods for any reason whatsoever, including issues of public health and safety and meteorological conditions, countries affected by acts of terrorism, natural disasters, the release of nuclear radiation or countries undergoing any other event of force majeure.

HOW TO USE OUR SERVICES?

→ DO YOU NEED ASSISTANCE?

In the event of an emergency, it is imperative to contact the emergency services for all problems falling within their competence.

In order to allow us to intervene, we recommend that you prepare your call.

We will ask you for the following information:

- your surname(s) and first name(s);
- **your contract number: 9291**
- the exact location where you are, the address and telephone number where you can be reached.

You must:

- contact the assistance platform without delay at the telephone number: **01 55 98 88 17** (+ 33 1 55 98 88 17 from abroad) ;
- obtain our prior agreement before taking any initiative or incurring any expense;
- comply with the solutions we recommend;
- provide us with all the elements relating to the contract taken out;
- provide us with all the original supporting documents for the expenses for which reimbursement is requested.

Only the phone call of the Insured at the time of the event allows the implementation of the assistance services.

Upon receipt of the phone call, the Insurer, after verifying the claimant's rights, organizes and pays for the benefits provided for in this agreement.

To benefit from a service, the Insurer may ask the Insured to justify the capacity he invokes and to produce, at his expense, the documents and documents proving this right.

The Insured must allow our doctors access to any medical information concerning the person for whom we are intervening. This information will be treated with respect for medical secrecy.

The Insurer cannot under any circumstances replace the local emergency relief organizations and intervenes within the limits of the agreements given by the local authorities, nor bear the costs thus incurred, with the exception of the costs of transport by ambulance. or by taxi to the nearest place where appropriate care can be provided, in the event of a mild ailment or minor injuries requiring neither repatriation nor medical transport.

The interventions that the Insurer is required to carry out are carried out in full compliance with national and international laws and regulations. They are therefore linked to obtaining the necessary authorizations from the competent authorities..

When the Insurer has paid for the transport of an Insured, the latter must return his return ticket initially planned and not used.

The Insurer decides on the nature of the air ticketing made available to the Insured according to the possibilities offered by the air carriers and the duration of the journeyt.

→ YOU WISH TO DECLARE A CLAIM COVERED UNDER THE INSURANCE COVER?

In all cases, you or anyone acting on your behalf must contact ASSUREVER within 5 days, either by email, telephone or post:

ASSUREVER

Service Gestion Clients

TSA 52216

18039 BOURGES Cedex

Tél. : + 33 1 73 03 41 01

Mail : gestion@assurever.com

Offices open Monday to Friday from 9 a.m. to 6 p.m

CUMULATION OF GUARANTEES

If the risks covered by this contract are covered by another insurance, you must inform us of the name of the insurer with whom another insurance has been taken out (article L121-4 of the Insurance Code) as soon as this information has been provided to your knowledge and at the latest when the claim is declared.

FORFEITURE OF BENEFITS AND GUARANTEE FOR FRAUDULENT DECLARATION

In the event of a Claim or request for intervention in respect of assistance services and/or insurance guarantees (provided for in these General Provisions), if you knowingly use inaccurate documents as supporting documents or use fraudulent means or inaccurate or reticent declarations, you will be deprived of any right to the assistance services and insurance guarantees, provided for in these General Provisions, for which these declarations are required, this without prejudice to the legal proceedings that we would then be entitled to sue you.

WHAT ARE THE LIMITATIONS IN CASE OF FORCE MAJEURE OR OTHER SIMILAR EVENTS?

Under no circumstances can we replace local organizations in the event of an emergency. We cannot be held responsible for any shortcomings or delays in the performance of the services resulting from cases of force majeure or events such as:

- civil or foreign wars, notorious political instability, popular movements, riots, attacks, acts of terrorism, piracy, reprisals,
- recommendations of the O.M.S. or national or international authorities or restriction on the free movement of persons and goods, whatever the reason, in particular health, safety, meteorological, limitation or prohibition of aeronautical traffic,
- strikes, explosions, pollution, natural disasters, disintegration of the atomic nucleus, or any irradiation from a source of energy presenting a character of radioactivity,
- delays and/or impossibility to obtain administrative documents such as entry and exit visas, passport, etc.; necessary for your transport inside or outside the country where you are or for your entry into the country recommended by our doctors for hospitalization,
- use of local public services or stakeholders that we are required to use under local and/or international regulations,
- non-existence or unavailability of technical or human means suitable for transport (including refusal to intervene).

EXCEPTIONAL CIRCUMSTANCES

Passenger carriers (including airlines in particular) are likely to impose restrictions for people with certain pathologies or for pregnant women, applicable until the start of transport, and subject to change without notice (and for airlines: medical examination, medical certificate, etc.). As a result, the repatriation of these people can only be carried out subject to the absence of refusal from the carrier, and of course, the absence of an unfavorable medical opinion (as provided for and according to the procedures provided for in the chapter "TRANSPORT/REPATRIATION") with regard to the health of the Insured or the unborn child.

EXCLUSIONS COMMON TO ALL COVER

The *Standard Multi-sports* insurance policy does not under any circumstances cover damage or accidents caused by one of the following events:

- use of drugs, narcotics, medicines not prescribed by a doctor;
- drunkenness, intentional acts, conscious disregard of official prohibitions;
- suicide or attempted suicide, self-harm;
- handling or possession of weapons, including those used for hunting;
- participation in betting, crimes, brawls (except in cases of self-defense);
- all cases of force majeure making it impossible to perform the contract, in particular prohibitions decided by local, national or international authorities;
- civil or foreign wars, riots, civil commotion, strikes, attacks, acts of terrorism or sabotage.
- pollution, natural disasters;
- epidemics and pandemics unless otherwise specified in the cover;
- aesthetic treatments ;
- any manifestation of radioactivity;
- participation as a competitor in a competitive sport or rally giving the right to a national or international classification which is organized by a sports federation for which a license is issued, as well as training for these competitions;
- accidents resulting from your participation, even as an amateur, in the following sports: mechanical or aerial sports, ski jumping, high mountain mountaineering, rock climbing and rock climbing, caving, base jumping,

speed riding, bobsleigh, skeleton, racing luge, combat sports, MMA, parkour, competitive luge, ice hockey, extreme skiing, Camargue races, hunting dangerous animals;

- sport in official competition (giving rise to a regional, national or international ranking) or during training for a competition during record attempts; • the practice of sport on a professional basis;
- participation in competitions or endurance or speed events and their preparatory tests, on board any land, water or air locomotion vehicle;
- the consequences of non-compliance with recognized safety rules related to the practice of any leisure sporting activity.

CLAIMS PROCESSING

1. A complaint is the oral or written expression of dissatisfaction with a professional. A request for a service or provision, information or advice is not a complaint. For any claim on your Assurance and Assistance guarantees listed below, you can contact MUTUAIDE by calling 01 55 98 88 17:
 - Repatriation Assistance
 - Sanitary Protection Assistance
 - Individual travel accident

If your oral complaint is not satisfied, we invite you to write to us, either by e-mail to: qualite.assistance@mutuaide.fr or by post to :

MUTUAIDE ASSISTANCE
Service Qualité Clients
126 rue de la Piazza
CS 20010
93196 Noisy-le-Grand Cedex

In the event of a written complaint, we will acknowledge receipt thereof within a maximum of 10 working days from the date of dispatch.

Our response must be provided to you in writing two months at the latest from the sending of this complaint.

If this answer does not satisfy you, or if no answer has been given to you at the end of these two months, you have the right to contact Insurance Mediation on the website www.mediation-assurance.org or by mail (Médiation de l'Assurance TSA 50110, 75441 Paris Cedex 09), without prejudice to the right to take legal action.

2. A complaint is the oral or written expression of dissatisfaction with a professional. A request for a service or provision, information or advice is not a complaint. For any claim on your Insurance guarantees listed below, you can contact ASSUREVER by calling 01 73 03 41 01:
 - Cancellation of the trip
 - Sanitary Protection Cancellation
 - Interruption of trip
 - Breakage of skis, snowboards, windsurfing boards, surfboards

If your oral complaint is not satisfied, we invite you to write to us, either by e-mail at: reclamation@assurever.com or by mail at :

ASSUREVER
Service Réclamation
TSA 52216
18039 BOURGES Cedex

In the event of a written complaint, we will acknowledge receipt thereof within a maximum of 10 working days from the date of dispatch.

Our response must be provided to you in writing two months at the latest from the sending of this complaint.

If this answer does not satisfy you, or if no answer has been given to you at the end of these two months, you have the right to contact Insurance Mediation on the website www.mediation-assurance.org or by mail (Médiation de l'Assurance TSA 50110, 75441 Paris Cedex 09), without prejudice to the right to take legal action.

3. A complaint is the oral or written expression of dissatisfaction with a professional. A request for a service or provision, information or advice is not a complaint.
For any claim on your Personal Civil Liability, you can contact MUTUAIDE by calling 01 55 98 88 17.

If your oral complaint is not satisfied, we invite you to write to us, either by e-mail to: reclamations@tmhcc.com or by post to:

TOKIO MARINE EUROPE SA (TOKIO MARINE HCC)
6-8 boulevard Haussmann – CS 40064
75441 PARIS Cedex 09
Tél : 01 53 29 30 00 – Fax : 01 42 97 43 87

In the event of a written complaint, we will acknowledge receipt thereof within a maximum of 10 working days from the date of dispatch.

Our response must be provided to you in writing two months at the latest from the sending of this complaint.

If this answer does not satisfy you, or if no answer has been given to you at the end of these two months, you have the right to contact Insurance Mediation on the website www.mediation-assurance.org or by mail (Médiation de l'Assurance TSA 50110, 75441 Paris Cedex 09), without prejudice to the right to take legal action.

PERSONAL DATA

The Insured acknowledges having been informed that the Insurer processes his personal data in accordance with the regulations relating to the protection of personal data in force and that moreover:

- the answers to the questions asked are mandatory and that in the event of false declarations or omissions, the consequences for him may be the nullity of the subscription to the contract (article L 113-8 of the Insurance Code) or the reduction indemnities (article L 113-9 of the Insurance Code);
- the processing of personal data is necessary for the subscription and execution of its contract and its guarantees, the management of commercial and contractual relations, or the execution of legal, regulatory or administrative provisions in force;
- the data collected and processed are kept for the duration necessary for the execution of the contract or the legal obligation. These data are then archived in accordance with the durations provided for by the provisions relating to the prescription;
- the recipients of the data concerning him are, within the limits of their attributions, the services of the Insurer in charge of the signing, management and execution of the Insurance contract and guarantees, its delegates, agents, partners, subcontractors, reinsurers in the exercise of their missions.
They can also be transmitted, if necessary, to professional organizations as well as to all persons involved in the contract such as lawyers, experts, legal assistants and ministerial officers, curators, guardians, investigators.
Information concerning him may also be transmitted to the Subscriber, as well as to all persons authorized as Authorized Third Parties (courts, arbitrators, mediators, ministries concerned, supervisory and control authorities and all public bodies authorized to receive them as well as departments in charge of control such as statutory auditors, auditors and departments in charge of internal control);
- in its capacity as a financial institution, the Insurer is subject to the legal obligations stemming mainly from the Monetary and Financial Code with regard to the fight against money laundering and the financing of terrorism and, as such, it implements contract monitoring processing that may lead to the drafting of a suspicious transaction report or an asset freezing measure.
The data and documents concerning the Insured are kept for a period of five (5) years from the closing of the contract or the termination of the relationship;
- his personal data may also be used in the context of treatment to combat insurance fraud which may lead, where appropriate, to inclusion on a list of persons presenting a risk of fraud.
This registration may have the effect of extending the study of his file, or even the reduction or refusal of the benefit of a right, a benefit, a contract or service offered.
In this context, personal data concerning him (or concerning persons who are parties or interested in the contract may be processed by all authorized persons working within the entities of the Insurer Group in the context of the fight against fraud. This data may also be intended to authorized personnel of organizations directly affected by fraud (other insurance organizations or intermediaries; judicial authorities, mediators, arbitrators, court officers, legal officers; third-party organizations authorized by a legal provision and, where applicable, victims of acts 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 proves to be relevant. In the event of a relevant alert, the data is kept for up to five (5) years from the closing of the fraud file, or until the end of the legal proceedings and the applicable limitation periods.
For persons registered on a list of suspected fraudsters, the data concerning them are deleted after the period of 5 years from the date of registration on this list;

- in its capacity as Insurer, it is entitled to process data relating to offences, convictions and security measures either at the time of the subscription of the contract, or during its execution or within the framework of the management of litigation;
- the personal data may also be used by the Insurer in the context of the processing it implements and the purpose of which is research and development to improve the quality or relevance of its future insurance products and/or support and service offerings;
- the personal data concerning him may be accessible to some of the Insurer's employees or service providers established in countries outside the European Union;
- the Insured has, by proving his identity, a right of access, rectification, deletion and opposition to the data processed. He also has the right to ask to limit the use of his data when they are no longer necessary, or to recover in a structured format the data he has provided when the latter are necessary for the contract or when he has consented to the use of this data.
He has the right to define directives relating to the fate of his personal data after his death. These guidelines, general or specific, concern the storage, erasure and communication of his data after his death.
These rights can be exercised with the Data Protection Representative of the Insurer:
By email : to the email address DRPO@MUTUAIDE.fr
or
by mail : by writing to the following address – MUTUAIDE ASSISTANCE – 126 rue de la Piazza – CS 20010 – 93196 Noisy-le-Grand Cedex.

After having made the request to the Delegate representing data protection and not having obtained satisfaction, he has the possibility of seizing the CNIL (National Commission for Computing and Freedoms).

SUBROGATION

The Insurer is subrogated up to the amount of the indemnities paid and the services provided by it in the rights and actions of the Insured, against any person responsible for the facts that motivated his intervention..

When the services provided in execution of the agreement are covered in whole or in part with another company or institution, the Insurer is subrogated in the rights and actions of the Insured against this company or this institution.

PRESCRIPTION

Pursuant to Article L 114-1 of the Insurance Code, any action deriving from this contract is time-barred two years from the event giving rise thereto. This period is extended to ten years for death guarantees, the actions of the beneficiaries being prescribed no later than thirty years from this event.

However, this period does not run:

- in the event of reluctance, omission, false or inaccurate declaration on the risk incurred, only from the day on which the Insurer became aware of it;
- in the event of a claim, only from the day the interested parties became aware of it, if they prove that they were unaware of it until then.

When the action of the Insured against the Insurer is caused by the recourse of a third party, this limitation period only runs from the day on which this third party took legal action against the Insured or was compensated by this last.

This limitation period may be interrupted, in accordance with Article L 114-2 of the Insurance Code, by one of the following ordinary causes of interruption:

- recognition by the debtor of the right of the person against whom he prescribed (article 2240 of the Civil Code);
- a legal action, even in summary proceedings, until the proceedings are terminated. The same applies when it is brought before an incompetent court or when the act of referral to the court is canceled as a result of a procedural defect (articles 2241 and 2242 of the Civil Code). The interruption is void if the plaintiff withdraws his request or allows the proceedings to expire, or if his request is definitively rejected (article 2243 of the Civil Code);
- a precautionary measure taken pursuant to the Code of Civil Enforcement Procedures or an act of forced execution (article 2244 of the Civil Code).

You are reminded that:

- The interpellation made to one of the joint and several debtors by a legal action or by an act of forced execution or the recognition by the debtor of the right of the one against whom he prescribed interrupts the limitation period against all the others, even against their heirs.

- On the other hand, the interpellation made to one of the heirs of a joint and several debtor or the recognition of this heir does not interrupt the limitation period with regard to the other co-heirs, even in the event of a mortgage debt, if the obligation is divisible. This interpellation or this acknowledgment only interrupts the limitation period, with regard to the other co-debtors, for the part for which this heir is liable.

To interrupt the limitation period for the whole, with regard to the other co-debtors, it is necessary to interpellate all the heirs of the deceased debtor or the recognition of all these heirs (article 2245 of the Civil Code).

The interpellation made to the principal debtor or his recognition interrupts the limitation period against the surety (article 2246 of the Civil Code).

The limitation period may also be interrupted by:

- appointment of an expert following a claim;
- the sending of a registered letter with acknowledgment of receipt (addressed by the Insurer to the Insured as regards the action for payment of the premium, and addressed by the Insured to the Insurer as regards the settlement of the claim indemnity).

PLURALITY OF INSURANCE

The Policyholder/Beneficiary is required to declare the existence of other insurance policies covering the same risks as this policy when declaring a Claim. When several insurances are taken out without fraud, each of them produces its effects within the limits of the guarantees.

SETTLEMENT OF DISPUTES

Any dispute arising between the Insurer and the Insured relating to the determination and settlement of benefits shall be submitted by the most diligent party, failing amicable resolution, to the competent court of the domicile of the Insured in accordance with the provisions set out in article R 114-1 of the Insurance Code.

FALSE STATEMENTS

When they change the subject of the risk or diminish our opinion of it :

- **any reluctance or intentionally false statement on your part will invalidate the contract. The premiums paid remain with us and we will be entitled to demand payment of the premiums due, as provided for in article L113-8 of the Insurance Code,**
- **any omission or misrepresentation on your part, for which bad faith has not been established, will result in the termination of the contract 10 days after the notification which will be sent to you by registered letter and/or the application of the reduction in compensation in accordance with the article L113-9 of the Insurance Code.**

FIGHT ANTI-MONEY LAUNDERING

The checks that we are legally required to carry out in the fight against money laundering and the financing of terrorism, in particular on cross-border capital movements, may lead us at any time to ask you for explanations or supporting documents, including on the acquisition of insured property. In accordance with the Data Protection Act of January 6, 1978 amended by the Act of August 6, 2004 and the Monetary and Financial Code, you have the right to access data concerning you by sending a letter to the National Commission for Computing and Liberties.

EXERCISE OF THE RIGHT OF RENUNCIATION PROVIDED FOR IN ARTICLE L.112-10 OF THE INSURANCE CODE (HAMON LAW)

In the context of optional guarantees, you are invited to check that you are not already the beneficiary of a guarantee covering one of the claims covered by the new contract. If this is the case, you have the right to waive this contract for a period of 30 (calendar) days from its conclusion, without costs or penalties, if all the following conditions are met:

- you have taken out this contract for non-professional purposes;
- this contract comes in addition to the purchase of a good or service sold by a supplier;
- the contract you wish to waive has not been fully executed;
- you have not declared any loss covered by this contract.

In this situation, you can exercise your right to waive this contract by letter or any other durable medium addressed to the insurer of the new contract. The insurer is required to reimburse you for the premium paid, within 30 days of your waiver.

« I, the undersigned Mr/Mrs.....residing waive my contract No.....subscribed to, in accordance with article L 112-10 of the Insurance Code. I certify that I am not aware, on the date of sending this letter, of any claim involving a guarantee of the contract. »

If you wish to waive your contract but you do not meet all of the above conditions, check the terms of waiver provided for in your contract.

APPLICABLE LAW AND JURISDICTION

This contract is governed by French law. The contracting parties declare that they submit to the jurisdiction of the French courts and waive any proceedings in any other country.

LANGUAGE USED

The language used in the context of pre-contractual and contractual relations is the French language.

POLICY

The insurance and assistance guarantees excluding Civil Liability Private Life Abroad stipulated in this document are taken out with MUTUAIDE ASSISTANCE, under the number 9291.

Private Life Civil Liability Abroad guarantees are taken out with TOKIO MARINE EUROPE SA (TOKIO MARINE HCC).

INSURANCE GUARANTEES

CANCELLATION OF TRIP

The Insurer guarantees the reimbursement of penalties for cancellation of expenses incurred including: hotel, vacation rental, training courses and sports lessons, ski lift pass and rental of sports equipment.

This cancellation, notified BEFORE DEPARTURE, must be consecutive to the occurrence, after joining the *Standard Multi-sports* contract, of one of the following events:

- **Serious illness, serious accident related to sports practice requiring hospitalization**
- **Death resulting from an accident during sports practice.**

If the subscription to the *Standard Multi-sports* contract is after the appearance of the reason for cancellation and the Subscriber/Beneficiary was aware of it, the Subscriber/Beneficiary cannot claim compensation.

The compensation due under this guarantee cannot exceed the actual amount of the penalties invoiced following the cancellation within the limit of €400. Application fees, taxes, and any insurance premiums are non-refundable. An Excess of €50 per person will be deducted from the indemnity that the Insurer will pay.

SANITARY PROTECTION CANCELLATION

The guarantee is acquired for the reasons and circumstances listed below, excluding all other reasons and circumstances and within the limit indicated in the List of Sanitary Protection Guarantees:

- **Serious illness in case of epidemic or pandemic, Serious bodily injury or death, (including the consequences, after-effects, complications or the aggravation of a known illness or accident):**
 - of yourself, of your partner or spouse (legal or de facto), of your ascendant or descendant, of your legal guardian or of any other person within your household;
 - of your brother, of your sister, of your children including those of your partner or spouse (legal or de facto), one of your direct ascendant, brother-in-law, sister-in-law, son-in-law, daughter-in-law, father-in-law or mother-in-law;
 - of your professional work replacement;
 - of the person responsible, during your trip, for looking after your legally-dependent children or for the care of a disabled person living in the same household as you, provided there is hospitalization for more than 48 hours or death;
 - of the person accompanying you during your trip, provided that their first and last name have been indicated under the same special conditions as you and that they have paid the insurance premium.

- **Lack of vaccination against Covid 19**
 - ✓ when at the time of taking out this contract, the country of destination did not impose vaccination against Covid 19 to return its territory but that at the time of your departure it imposes it;
 - and that you are no longer within the time required to carry out this vaccination allowing you to travel,
 - or that you cannot proceed with this vaccination, following a medical contraindication to vaccination.
- **Refusal of boarding at the airport, train station, bus station or ferry terminal of departure following a temperature check organized by the health authorities of the country of departure or the transport company with which you are traveling** (Proof issued by the transport company that denied you boarding, or by the health authorities, must be provided; in the absence of this proof, no compensation will be possible).

It is up to you to establish the reality of the situation entitling you to our services, so we reserve the right to refuse your request, on the advice of our doctors, if the information provided does not prove the materiality of the facts.

PROVISIONS COMMON TO “TRAVEL CANCELLATION” AND “SANITARY PROTECTION CANCELLATION” COVER

THE AMOUNT OF THE GUARANTEE

We will reimburse you the deposit or any sum retained by the travel organizer, and according to the conditions of sale of the trip (**excluding the booking fee, the insurance premium and after deduction of the airport taxes reimbursed to you by the carrier**), when you are obliged to cancel your trip before departure.

You are reminded that airport taxes, included in the price of the ticket, are charges which are payable in relation to the actual embarkation of the passenger and that the airport company is obliged to reimburse you for these amounts when you have not boarded. You must consult the general conditions of sale or transport in order to find out how these taxes are refunded (art. L 113-8 of the French Consumer Code).

WITHIN WHAT TIME LIMIT DO YOU HAVE TO DECLARE THE CLAIM ?

Two steps

1/ From the first symptoms of the illness or upon knowledge of the event giving rise to the guarantee, you must IMMEDIATELY notify your travel agency.

If you cancel the trip at a later date with your travel agency, we will refund only the cancellation charges incurred on the date of the event, confirmed by a competent medical authority and in accordance with the cancellation conditions of your travel agency's special terms and conditions of sale.

2/ However, you should file your claim with ASSUREVER within five working days following the event covered.

WHAT ARE YOUR OBLIGATIONS IN THE EVENT OF A CLAIM ?

Your written claim must be accompanied by/

- A medical certificate and/or an administrative hospitalization form specifying the origin, nature, seriousness and foreseeable consequences of the illness,
- in the event of death, a certificate and civil status record,
- in other cases, any acknowledgment justifying the reason for your cancellation.

You must provide ASSUREVER with the documents and medical information required to process your claim, which includes the medical questionnaire to be completed by your doctor and the completed claim form provided by our service.

Your health documents and information must be obtained from your personal doctor before sending them to ASSUREVER.

You will also have to provide any information or documents requested to support the grounds of your cancellation:

- ✓ photocopies of all medical prescriptions together with pharmacy receipts, results of tests and/or examinations and all other documents justifying their request or execution,
- ✓ statements from the Social Security or any other similar body relating to the reimbursement of treatment costs and the payment of daily allowances,
- ✓ the original of the paid invoice to your travel agency and the cancellation invoice issued by your travel agency,
- ✓ the number of your insurance policy,
- ✓ the registration form issued by the travel agency,
- ✓ In the event of an accident, you must specify the causes and circumstances of the accident and provide us with the names and addresses of those responsible and any witnesses,
- ✓ in the event of denied boarding: proof issued by the transport company that denied you boarding, or by the health authorities; without this proof, no compensation will be possible),
- ✓ and any other necessary documents.

Furthermore, it is expressly agreed that you accept in advance the principle of a check-up by our medical advisor. Therefore, if you object without legitimate reason, you will lose your warranty rights.

WHAT WE EXCLUDE IN “CANCELLATION OF THE TRIP” AND IN “SANITARY PROTECTION CANCELLATION”

The Cancellation and Sanitary Protection Cancellation guarantees do not cover the impossibility to leave due to border closures, material organization, accommodation conditions or security at the destination.

In addition to the exclusions common to all guarantees are also excluded:

- an event, illness or accident that has been the subject of an initial observation, relapse, aggravation or hospitalization between the date of purchase of the trip and the date of subscription of the insurance contract,
- cancellation caused by a person hospitalized at the time of booking your trip or taking out the contract,
- all circumstances affecting only your personal comfort,
- complications of pregnancy beyond the 28th week and in all cases, voluntary termination of pregnancy, childbirth, in vitro fertilization and their consequences,
- forgetting to be vaccinated,
- default of any kind, including financial default, by the carrier making it impossible to perform its contractual obligations,
- the lack or excess of snow cover unless otherwise stipulated in the guarantee,
- any medical event whose diagnosis, symptoms or cause are of a psychic, psychological or psychiatric nature, and which has not resulted in hospitalization for more than 3 consecutive days after the subscription of the present Contract,
- the consequences of criminal proceedings against you,
- any event occurring between the date of subscription to the trip and the date of subscription to the insurance contract,
- the absence of randomness,
- an intentional and/or wrongful act reprehensible by law,
- the consequences of alcoholic states and the use of drugs, any narcotic substances mentioned in the Public Health Code, medicines and treatments not prescribed by a doctor,
- the simple fact that the geographical destination of the trip is not recommended by the French Ministry of Foreign Affairs,
- a negligent act on your part,
- any event for which the tour operator may be responsible in application of the Tourism Code in force,
- failure, for any reason whatsoever, to present documents essential for the trip, such as passport, identity card, visa, travel documents, vaccination record, except in the case of theft, within 48 hours prior to departure, of the passport or identity card.

INTERRUPTION OF TRIP

In the event of an accident related to the sports practice of the Member(s)/Beneficiary(ies) resulting in an interruption of stay and repatriation organized by the Insurer or resulting in the obligation duly noted by the Insurer to keep the room, the Insurer reimburses on presentation of original supporting documents: ski lift pass, lessons, rental of sports equipment, pro rata temporis, with a maximum of €400 per Claim.

AMOUNT OF GUARANTEE

The compensation paid under this contract may in no case exceed the price of the trip declared at the time of subscription and within the limits provided for in the Table of Cover.

WHAT WE EXCLUDE

In addition to the exclusions common to all guarantees, we cannot intervene in the following circumstances:

- requests for reimbursement of transport tickets,
- requests for reimbursement of services not appearing on the travel registration form and therefore not guaranteed (even if these services are purchased from the local representative of the organizer on site),
- interruptions of stay and activity whose generating event was known before the start of the trip.

WHAT ARE YOUR OBLIGATIONS IN THE EVENT OF A CLAIM?

You must report your claim to ASSUREVER within 5 days of becoming aware of it, except in the event of a fortuitous event or force majeure. After this period, if we suffer damage as a result of the late declaration, you lose all right to compensation.

You must send ASSUREVER all the documents necessary for the constitution of the file and thus prove the merits and the amount of the claim.

In any case, you must provide us:

- the originals of the tour operator's detailed invoices showing the ground services and the transport services;
- the travel registration invoice or the agency registration form;
- the certificate or proof from the Insurer confirming the date of repatriation or early return and the reason for it;
- any other document that we deem necessary for the investigation of the file.

Without the communication to our medical adviser of the medical information necessary for the investigation, the file cannot be settled.

BREAKAGE OF SKI, SNOWBOARD, WINDSURF, SURF

In the event of breakage of standard equipment: skis, snowboard, windsurfing board or surfboard belonging to the Policyholder/Beneficiary, the Insurer will provide rental equipment equivalent to that damaged for a maximum period of 8 days from a sports equipment rental company.

The broken equipment must have a market value greater than or equal to €100 at the time of the Claim. To benefit from this guarantee, the Member/Beneficiary must bring his damaged pair of skis, snowboard, windsurfing board or surfboard to a rental company that the Insurer will indicate to him.

PERSONAL CIVIL LIABILITY WHILST ABROAD

SPECIFIC DEFINITIONS

Absolute deductible

The sum (or the percentage) which remains in any event payable by the Insured out of the amount of the indemnity due by the Insurer. The deductible applies per claim, regardless of the number of victims. The deductibles expressed as a percentage apply to the amount of compensation owed by the Insurer.

Accidental pollution

The emission, dispersion, rejection or deposit of any solid, liquid or gaseous substance, diffused by the atmosphere, the ground or the waters, which result from a sudden and unforeseen event and which do not take place in a slow, gradual or gradual.

Civil liability

Legal obligation incumbent on any person to repair the damage they have caused to others.

Claim

Any request for amicable or contentious compensation, made by the victim of damage or his heirs and addressed to the Insured or the Insurer.

Consequential non-material damage

Any pecuniary loss resulting from the total or partial deprivation of enjoyment of an asset or right, loss of profit, loss of customers, interruption of a service or activity, and which is the direct consequence of guaranteed physical injury or material damage.

Domicile

For the "Private Civil Liability Abroad" cover, the domicile of the Insured must be located in Mainland France or Overseas Department.

Injurious fact

Fact which constitutes the generating cause of the damage.

Insured

Persons residing in Mainland France or Overseas Department and having subscribed to this policy by a tour operator or a travel agency are considered as Insured for the "Private Civil Liability Abroad" guarantee.

Material damage

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

Motorized land vehicle

Machine which moves on the ground (i.e. other than aerial or naval), without being linked to a railway line, self-propelled (propelled by its own motive power) and which is used for the transport of persons (even if it is just about the driver) or things.

Physical injury

Any bodily injury suffered by a natural person and the resulting damage.

Sinister

Any damage or set of damages caused to third parties, engaging the liability of the Insured, resulting from a harmful event and having given rise to one or more complaints. The harmful event is the one which constitutes the cause generating the damage. A set of harmful events having the same technical cause is treated as a single harmful event.

Third

Any other person than the Insured.

PURPOSE OF THE GUARANTEE

The Insurer guarantees the Insured against the pecuniary consequences of the civil liability that may be incumbent on him due to the bodily, material and consequential damage caused to third parties during his private life. Private life means any activity of a non-professional nature.

DEFENSE

The Insurer assumes the defense of the Insured under the conditions referred to in Article 34, paragraph 1.

WHAT WE EXCLUDE**Are excluded :**

- The consequences of the intentional fault of the Insured.
- Damage caused by civil or foreign war, whether declared or not, riots and popular movements, acts of terrorism, attacks or sabotage.
- Damage caused by volcanic eruptions, earthquakes, storms, hurricanes, cyclones, floods, tidal waves and other cataclysms.
- Damage made unavoidable by the voluntary act of the Insured and which cause the insurance contract to lose its character as a random contract guaranteeing uncertain events (article 1964 of the Civil Code).
- The fine and any other penal sanction personally imposed on the Insured.
- Damage or aggravation of damage caused:
 - by weapons or devices intended to explode by modifying the structure of the atomic nucleus,
 - by any nuclear fuel, radioactive product or waste,
 - by any source of ionizing radiation (in particular any radioisotope).
- The consequences of the presence of asbestos or lead in the buildings or structures belonging to or occupied by the Insured, research work, destruction or neutralization of asbestos or lead, or the use of products containing asbestos or lead.
- The consequences of contractual commitments accepted by the Insured and which have the effect of increasing the liability which would have been incumbent upon him in the absence of said commitments.
- In the United States of America and Canada:
 - punitive damages or exemplary damages,
 - pollution damage.
- Damage of the nature of that referred to in Article L. 211-1 of the Insurance Code on compulsory automobile insurance and caused by motorized land vehicles, their trailers or semi-trailers of which the Insured has the ownership, custody or use (including the fact or the fall of the accessories and products used for the use of the vehicle, and of the objects and substances which it transports).
- Consecutive material and immaterial damage, caused by a fire, explosion or water damage originating in the buildings of which the Insured is the owner, tenant or occupant.

- Thefts committed in the buildings mentioned in the previous exclusion.
- Material damage (other than that referred to in the two previous exclusions) and consequential damage caused to property in the custody, use or deposit of the Insured.
- The consequences of air, sea, river or lake navigation using devices owned, kept or used by the Insured.
- Damage caused by weapons and their ammunition the possession of which is prohibited and of which the Insured is possessor or holder without prefectural authorization.
- Damage subject to a legal insurance obligation and resulting from the practice of hunting.
- Damage caused by animals other than domestic animals.
- Damage caused by first category dogs (attack dogs) and second category dogs (guard and defense dogs), defined in article 211-1 of the Rural Code, and by tamed wild animals or kept in captivity, mentioned in article 212-1 of the Rural Code, stray or not, of which the Insured is the owner or guardian (law n° 99-5 of January 6, 1999 relating to dangerous and stray animals and the protection animals).
- The results :
 - the organization of sports competitions;
 - the practice of sports as a license holder of a sports federation;
 - the practice of aerial or nautical sports.

It is specified that for all claims occurring in the USA, CANADA, the costs of expert fees, lawyers, justice and lawsuits are included in the amount of cover and subject to the application of the deductible.

PERIOD OF GUARANTEE

The cover of this contract is triggered by the harmful event and covers the Insured against the financial consequences of claims, as soon as the harmful event occurs between the initial effective date of the cover and its date of termination or expiry, regardless of the date of the other components of the claim (article L.124-5 of the Insurance Code).

AMOUNT OF GUARANTEES

The amounts of cover expressed per claim constitute the limit of the Insurer's commitment for all claims relating to the same harmful event. The date of the loss is that of the harmful event. The conditions and amounts of cover are those in force on this date. The amount of the guarantee is fixed as designated in the Table of Guarantees.

WHAT ARE YOUR OBLIGATIONS IN THE EVENT OF A CLAIM?

You should contact:

**MUTUAIDE - SERVICE ASSURANCE
TSA 20001 - 93196 NOISY LE GRAND CEDEX**

INDIVIDUAL TRAVEL ACCIDENT

1. SPECIFIC DEFINITIONS

Accident

Any unintentional physical injury on the part of the victim and resulting from the sudden action of an external cause. By extension to this definition, the pathological manifestations that would be the direct consequence of this physical injury are guaranteed.

The following are assimilated to accidents:

- injuries caused by fire, jets of 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 stings, excluding diseases (such as malaria and sleeping sickness), the primary origin of which can be traced to such bites or stings;
- injuries that may occur during the practice of scuba diving, including those due to hydrocution or a decompression phenomenon;
- bodily injury resulting from assaults or attacks of which the Insured is the victim, unless it is proven that he would have taken an active part as the author or instigator of these events;
- the physiological consequences of the surgical operations, provided that they were necessitated by an accident included in the guarantee.

The following are not assimilated to accidents:

- ruptured aneurysms, myocardial infarction, cerebral embolism, epileptic seizures, meningeal hemorrhage.

Beneficiary(ies)

The person(s) who receive from the Insurer the sums due in respect of a claim.

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

- if the INSURED is married: his spouse not legally separated at his fault, nor divorced, failing that his children born or to be born, living or represented, failing that his heirs,
- if the INSURED is a signatory of a PACS, his partner, failing that his heirs,
- if the INSURED is widowed or divorced: his children or his heirs,
- if the INSURED is single: his heirs.

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

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

Permanent Disability

Presumed permanent impairment of the physical capacities of the Insured.

Its importance is quantified by a rate determined by reference to the Social Security Invalidity scale.

Illness

Any deterioration in health confirmed by a competent medical authority.

2. PURPOSE OF INSURANCE

The purpose of the contract is to guarantee the payment of those indemnities defined below, which are provided for and the amount of which is fixed in the Table of Cover, in the event of a physical accident which could affect the Insured.

Only Insured Persons under the age of 70 can benefit from the "Individual Accident" cover.

3. EXCLUSIONS FROM THE « PERSONAL TRAVEL ACCIDENT COVER »

We cannot intervene in the circumstances set out below:

- Accidents caused or provoked intentionally by the Insured, the consequences of his completed or attempted suicide, as well as accidents caused by the use of drugs or narcotics not medically prescribed;
- Accidents occurring when the Insured is the driver of a vehicle and his blood alcohol level is higher than that legally permitted in the country where the accident takes place;
- Accidents resulting from the Insured's participation in a brawl (except in the case of self-defense or assistance to a person in danger), a duel, an offense or a criminal act;
- Accidents occurring during the use as pilot or crew member of a device allowing to move in the air or during the practice of sports carried out with or from these devices;
- Accidents caused by the practice of a sport on a professional basis and the practice, even as an amateur, of all sports requiring the use of mechanical motorized vehicles, whether as a driver or passenger. By practicing a sport, we mean training, testing, as well as participation in sporting events or competitions;
- Accidents caused by war, civil or foreign, declared or not;
- Accidents due to ionizing radiation emitted by nuclear fuels or by radioactive products or waste, or caused by weapons or devices intended to explode by modifying the structure of the atomic nucleus.

4. NATURE OF COMPENSATION

DEATH

If, within a maximum period of 24 months from the date of the accident of which the Insured has been the victim, this results in death, we guarantee for the benefit of the person(s) designated in the Specific Conditions as beneficiaries, the payment of the capital, the amount of which is fixed in the Table of Guarantees. When, prior to death, the same accident has given rise to the payment of an indemnity for permanent disability in application of the following conditions, the capital will be reduced by the amount of this indemnity. The officially recognized disappearance of the body of the Insured during the shipwreck, disappearance or destruction of the means of transport in which he was traveling, will create presumption of death at the end of the period of one year from the day of the accident. However, if it were noted at any time whatsoever after the payment of compensation for the disappearance of the Insured, that the latter is still alive, the sums unduly paid in this respect must be fully reimbursed to us.

PERMANENT DISABILITY

When the accident results in permanent disability, we pay the Insured an indemnity, the maximum of which corresponds to the rate of 100% of the Social Security Invalidity scale. If the disability is only partial, the Insured is only entitled to a fraction

of the indemnity proportional to the degree of disability. Infirmities not listed are compensated according to their gravity compared to that of the cases listed. The indemnity is fixed and contractual in nature: it is determined according to the rules set out above, without taking into account the age or profession of the Insured. The degree of infirmity will be established at the time when the final consequences of the accident can be fixed with certainty, and at the latest, unless conditions to the contrary are taken by mutual agreement between the Insured and us, at the expiry of the period of one year from the day of the accident. There is no accumulation of death and disability guarantees when they result from the same accident.

MULTIPLE DISABILITY

When the same accident results in several distinct infirmities, the main infirmity is first assessed under the conditions provided for above, the other infirmities then being assessed successively, in proportion to the capacity remaining after the addition of the previous ones, without the overall rate cannot exceed 100%. The absolute functional incapacity of a limb or organ is assimilated to the loss of this limb or organ. The loss of limbs or organs that were out of order before the accident does not give rise to any compensation. If the accident affects a limb or organ that is already disabled, the compensation will be determined by the difference between the condition before and after the accident. Under no circumstances may the assessment of injuries resulting from the accident be increased by the state of infirmity of limbs or organs not affected by the accident. Nerve disorders and nerve damage can only be taken into consideration, insofar as they constitute the consequence of a covered accident, if they are reflected on examination by clearly characterized clinical signs.

5. DECLARATION IN CASE OF CLAIM

In the event of a claim, it is important that we are quickly and fully informed of the circumstances in which it occurred and of its possible consequences.

FORM AND INFORMATION REQUIRED

The Insured or his successors in title, yourself if applicable, or any agent acting on their behalf are required to make, in writing or verbally against receipt, at our Head Office or with our representative designated in the contract, the declaration of any claim within fifteen days at the latest of the date on which they became aware of it. If the declaration of loss is not made within the period provided for above, except in fortuitous cases or cases of force majeure, we can oppose the forfeiture of the guarantee when we can establish that the delay in the declaration has caused us damage (article L.113-2 of the Insurance Code).

They must, in addition, provide us with this declaration, all information on the seriousness, the causes and the circumstances of the loss and indicate to us, if possible, the names and addresses of the witnesses and authors responsible.

The declaration of the loss must include in particular:

- the date, circumstances and place of the accident;
- the surname, first name, date of birth, address and profession of the victim(s);
- the initial medical certificate describing the nature of the lesions or injuries as well as their probable consequences;
- if applicable, the police or gendarmerie report, the names and addresses of the author of the accident and any witnesses.

The victim or his dependents must make every effort to limit the consequences of the accident and in particular seek the medical care required by the state of the victim.

The agents and doctors, designated by us, will have, unless justified opposition, free access to the victim and his treating doctors to ascertain his condition. Any intentional misrepresentation on the date or the circumstances of an accident, duly established and likely to harm us, entails the forfeiture of the rights to compensation which, if it has already been paid, must be reimbursed to us.

CONTROL

The Insured has the obligation to submit to the examination of the doctors delegated by us, our representatives will have free access to him whenever we deem it useful, **under penalty for the Insured or for any beneficiary of incurring the forfeiture of their rights in the event that, without valid reason, they refuse to allow the control of our delegates or obstruct the exercise of this control if, after the notice given forty-eight hours in advance by registered letter, we come up against their persistent refusal or remain prevented from exercising our control.**

Any fraud, concealment or misrepresentation on your part or that of the beneficiary of the compensation, intended to mislead us about the circumstances or the consequences of a claim, entails the loss of any right to compensation for the claim involved.

6. PAYMENT OF COMPENSATIONS

DETERMINATION OF THE CAUSES AND CONSEQUENCES OF THE ACCIDENT

The causes of the accident and its consequences, the degree of infirmity are established by agreement between the parties or, failing agreement, by two doctors each designated by one of the parties. In case of discrepancy, they will join a third doctor to decide between them; if they do not agree on the choice of the latter, or if one of the parties fails to designate its expert,

the designation will be made at the request of the most diligent party by the president of the tribunal de grande instance of the domicile of the Insured with dispensation from the oath and from all other formalities.

Each party will bear the fees and costs relating to the intervention of the doctor it has designated, those necessitated by the possible intervention of a third doctor being shared equally between them.

AGGRAVATION INDEPENDENT OF THE ACCIDENTAL FACT

Whenever the consequences of an accident are aggravated by the constitutional state of the victim, by a lack of care due to his negligence or by empirical treatment, by a pre-existing disease or infirmity and in particular by a diabetic state or haematic, the indemnities due will be determined according to the consequences that the accident would have had on a valid subject in normal health subjected to rational treatment.

PAYMENT

Guaranteed benefits are payable:

- In the event of death and permanent infirmity, within one month following the delivery of the supporting documents of the accidental death of the Insured and the quality of the beneficiary, or the agreement of the parties on the degree of disability.
- In the absence of agreement between the parties, the settlement of compensation will take place within fifteen days of the court decision becoming enforceable.

WHAT ARE YOUR OBLIGATIONS IN THE EVENT OF A CLAIM?

You should contact:

**MUTUAIDE - SERVICE ASSURANCE
TSA 20001 - 93196 NOISY LE GRAND CEDEX.**

GENERAL PROVISIONS OF ASSISTANCE

Repatriation or enforced early return will not be covered unless you have made a prior telephone call to the Assistance Centre and obtained their approval.

REPATRIATION ASSISTANCE

MEDICAL TRANSPORT

In the event of an accident or illness, **including in the event of an epidemic or pandemic**, the Insurer, on the advice of its medical team, will organize and pay for the initial transport of the Member/Beneficiary to a hospital or clinic close to the place of the Accident. If the condition of the Member/Beneficiary justifies it, the Insurer will organize and pay for the travel of a person on site to enable him/her to accompany him/her.

If the hospitalization exceeds 7 days on site, and if no one can stay at the bedside of the Member/Beneficiary, the Insurer will provide a return ticket to the place of hospitalization for a person designated by the patient.

REPATRIATION OF THE INJURED

When the Member/Beneficiary is declared to have been discharged from the hospital or clinic after treatment, the Insurer will organize and pay for the return of the patient to his or her Home if the initial means of transport cannot be used, if the latter is located in Metropolitan France. In the event of an accident involving a Member/Beneficiary whose Home is outside Metropolitan France, the Insurer, after consulting its medical team, limits its intervention to transferring the patient to the best equipped hospital closest to the place of the Accident or to his or her Home in Europe (territories located geographically and physically on the European continent). In the event of an accident involving a Member/Beneficiary travelling "outside Europe", the Insurer, on the advice of its medical team, limits its intervention to transfer to the best equipped hospital closest to the place of the Loss.

REPATRIATION OF PERSONS ACCOMPANYING THE POLICY HOLDER/BENEFICIARY

If the persons accompanying the Member/Beneficiary are covered by the same contract and they can no longer reach their home by the means initially planned, the Insurer will organize and pay for their return. The transport tickets not used for the return journey then become the property of the Insurer.

VISIT FROM A RELATIVE

You are hospitalized on site by decision of our medical team, before your medical repatriation, for a period of more than 7 days. We organize and pay for round-trip transport by train in 1st class or by airliner in economy class, for a relative residing in the same country as you. Our responsibility for its transport is up to the amount indicated in the Table of Guarantees.

The costs of accommodation, catering or other expenses remain in all cases the responsibility of this person.

This cover cannot be combined with the “Repatriation of persons accompanying the policyholder/beneficiary” cover.

MEDICAL CARE COSTS

This cover provides, in the event of a sports-related accident or illness, **including illness linked to an epidemic or pandemic**, and occurring during the period of validity of the cover and following a covered activity, payment of medical, pharmaceutical and hospitalization costs up to a maximum of €5,000 remaining to be paid after intervention by social organizations and third-party payers.

The Member/Beneficiary may, on presentation of proof, and within the limit of the actual costs remaining to be paid, after reimbursement by the social security system and any complementary insurance and provident scheme, submit a file to the Insurer in order to be reimbursed for the costs remaining to be paid.

The **cost of a PCR test** will be paid for when the Member/Beneficiary performs a transit test, if it is positive.

Supplementary cover for glasses and dental prostheses is limited to €100.

The costs of rehabilitation and physiotherapy only after fractures and/or surgical operations are reimbursed up to a maximum of € 350.

SEARCH TEAM AND EMERGENCY SERVICE COSTS

The Insurer will pay, up to a limit of €50,000 per event, regardless of the number of people, the costs of search, rescue and recovery (including helicopter), incurred during rescue operations following the practice of any sporting or leisure activity. As regards the costs of rescue, search and towing of surfers, windsurfers and jet skiers, the total amount is limited to € 1,200.

DEATH ASSISTANCE

TRANSPORT IN THE EVENT OF A DEATH

The Insurer will organize and pay for the transport of the body of the deceased Member/Beneficiary to the place of burial close to his/her home in France. In the event of a destination other than France, the ceiling for this cover may not exceed €3,000. Funeral expenses (coffin costs and preparation of the body) are covered up to €1,000 per Member/Beneficiary.

The cost of the ceremony, whether religious or not, is excluded.

The Insurer may organize and pay for the return of family members participating in the same trip and covered by the same contract to the place of burial if the means initially planned could not be used.

TRAVEL ASSISTANCE

ADVANCE OF THE PENAL BAIL

If, in the event of a violation of the legislation of the country in which the Policyholder/Beneficiary is located and in the context of sports practice, with the exception of driving motor vehicles, the latter is compelled by the local authorities upon payment of bail, the Insurer will advance it up to €7,500.

The reimbursement of this advance must be made within 1 month following the presentation of the request for reimbursement by the Insurer.

SANITARY PROTECTION ASSISTANCE

BEFORE THE TRIP

PRE-DEPARTURE TELECONSULTING

For any request of useful information required for the organization and smooth running of your trip, you can contact us before your departure 24 hours a day; 7 days a week.

The information concerns the following areas.

Sanitary information: Health, Hygiene, Vaccination, Precautions, Main Hospital Centers, Advice to women, Time difference, Pets on a trip.

Our doctors are also available for any information you may need in the event of travel during an epidemic or pandemic context.

The information is communicated by telephone and is not subject to written confirmation or the sending of documents. Information and information services are provided between 8:00 a.m. and 7:00 p.m. and within the time limits normally necessary to satisfy the request.

However, whatever the time of your call, we can take note of your requests as well as your contact details so that we can contact you back with the requested information.

DURING THE TRIP

IMPOSSIBLE RETURN

Your flight has been cancelled as a result of measures taken by the local government or airlines to restrict the movement of people in the event of an epidemic or pandemic.

If you are obliged to extend your stay, we will organize and pay for the hotel costs (room and breakfast) and those of your beneficiary family members or an insured accompanying person, up to the amount shown in the Table of Benefits.

We organize and pay for your repatriation home, up to the limit indicated in the Table of Benefits.

HOTEL EXPENSES FOLLOWING QUARANTINE

If you are obliged to extend your stay following your quarantine, we will organize and pay the hotel costs (room and breakfast) and those of your beneficiary family members or an insured accompanying person, up to the amount indicated in the Table of Benefits.

TAKING CHARGE OF A LOCAL TELEPHONE PACKAGE

If you are quarantined during a guaranteed trip outside your country of residence, we cover the cost of a local telephone package, within the limit indicated in the Table of Guarantees.

ON-SITE PSYCHOLOGICAL SUPPORT

In the event of significant trauma following an event linked to an epidemic or a pandemic, we can put you, at your request, in telephone contact with a psychologist, within the limit indicated in the Table of Benefits. The contents of this exchange are entirely confidential and do not replace the psychotherapeutic work carried out in private practice. Under no circumstances, due to the physical absence of the caller, can this service replace psychotherapy.

SUBSTITUTE SUITECASE

If you no longer have enough usable personal effects at your disposal due to your quarantine or hospitalization following an epidemic or a pandemic, we will provide the necessary fund for basic necessities up to the amount indicated in the Table of Benefits, upon presentation of proof.

AFTER THE TRIP

DOMESTIC ASSISTANCE

Following your repatriation by our care after an illness linked to an epidemic or pandemic, you cannot assume your usual household chores, we will provide a household helper, within the limit indicated in the Table of Benefits.

DELIVERY OF HOUSEHOLD GOODS

Following your repatriation by us after an illness linked to an epidemic or pandemic and you are unable to leave your home, we organize and fund a home delivery service for your household goods, within the limits of local shopping facilities and within the limit set out in the Table of Guarantees.

PSYCHOLOGICAL SUPPORT WHEN YOU RETURN HOME

In the case of a significant trauma following an event related to an epidemic or pandemic, we can organize a telephone consultation with a psychologist upon your return home, upon your request and within the limit indicated in the Table of Benefits. This consultation is entirely confidential and does not replace the psychotherapeutic work carried out in private practice. Under no circumstances, due to the physical absence of the caller, can this service replace psychotherapy.

WHAT WE EXCLUDE

We cannot, under any circumstances, substitute ourselves for local emergency relief organizations. In addition to the exclusions set out in the chapter "GENERAL INSURANCE & ASSISTANCE", the following are excluded:

- the consequences of exposure to intentionally or accidentally disseminated infectious biological agents, chemical agents such as combat gases, incapacitating agents, nerve agents or persistent neurotoxic effects,
- the consequences of intentional acts on your part or the consequences of fraudulent acts, suicide attempts or suicides,
- pre-existing health conditions and/or illnesses and/or injuries diagnosed and/or treated that have been the subject of continuous hospitalization, day hospitalization or outpatient hospitalization in the 6 months prior to any application, whether the manifestation or aggravation of the said condition,
- costs incurred without our agreement or not expressly provided for in these General Contract Provisions,
- costs not supported by original documents,
- claims occurring in countries excluded from cover or outside the validity dates of the contract, and in particular beyond the duration of the planned trip abroad,
- the consequences of incidents occurring during motorized events, races or competitions (or their trials), subject by the regulations in force to prior authorization from the public authorities, when you take part in them as a competitor, or during circuit trials subject to prior approval by the public authorities, even if you use your own vehicle,
- journeys undertaken for the purpose of diagnosis and/or medical treatment or cosmetic surgery, their consequences and the resulting costs,
- organizing and paying for the transport referred to in the "TRANSPORT/RETURN" chapter for minor ailments which can be treated locally and which do not prevent you from continuing your journey,
- requests for assistance relating to medically assisted procreation or the voluntary interruption of pregnancy, their consequences and the costs arising therefrom,
- applications relating to procreation or gestation for the account of others, its consequences and the costs arising therefrom,
- medical devices and prostheses (dental, hearing, medical),
- thermal cures, their consequences and costs,
- medical expenses incurred in your country of residence,
- the planned hospitalizations, their consequences and the resulting costs,
- optical costs (e.g. glasses and contact lenses),
- vaccines and vaccination fees,
- medical check-ups, their consequences and the related costs,
- aesthetic interventions, as well as their possible consequences and the costs arising from them,
- stays in a rest home, their consequences and the resulting costs,
- rehabilitation, physiotherapy, chiropractic, their consequences and the costs involved,
- medical or paramedical services and the purchase of products whose therapeutic nature is not recognized by French legislation, and the related costs,
- health check-ups for preventive screening, regular treatment or tests, their consequences and the resulting costs,
- search and rescue costs in the desert,
- organizing the search and rescue of people, particularly in the mountains, at sea or in the desert,
- the cost of excess baggage weight when travelling by air and the cost of transporting baggage when it cannot be transported with you,
- travel cancellation fees,
- restaurant costs,
- the consequences of infectious risk situations in an epidemic context which are subject to quarantine or preventive measures or specific monitoring by the international health authorities and/or local health authorities of the country where you are staying and/or of your country of origin, unless otherwise stipulated in the guarantee,
- customs duties.

ANNEX 1

Only in the context of the practice of sporting leisure on a private basis.

Are excluded:

- **civil liability for damage and accidents caused during sports practice requiring compulsory insurance, a permit or license. Similarly, civil liability for damages and accidents caused during any sporting event involving the use of a motor vehicle of any kind is excluded;**
- **civil liability cover vis-à-vis his employer, family members and civil liability vis-à-vis members of the group or teammates when practicing sport in a group or team, as well as civil liability for damage to property entrusted free of charge;**
- **professional civil liability, as well as the material civil liability of the sports leisure service provider, or the rental of equipment.**

As well as:

- **accidents resulting from participation in a professional capacity or under paid contract in official competitions organized by a sports federation as well as training for these competitions and civil liability related to these activities;**
- **air sports;**
- **extreme sports, however canyoning, running, white water swimming and rafting are authorized.**

BASIC SPORTS -> STANDARD MULTI-SPORTS COVERAGE

Athletics

Walking	Sprint	Shot put	Decathlon
Marathon	Relay race	Long jump	Heptathlon
Distance running	Discus throw	High jump	
Middle-distance running	Javelin throw	Pole jump	
Obstacle race	Hammer throw	Triple jump	

Team sports

Broomball on ice	American football	Motorball	Shinty
Balle au tambou au poing	Australian-rules football	Netball	Slamball
Bandy	Canadian football	Paintballing	Softball
Baseball	Indoor football	P'urhépecha pelota	Stoolball
Basket-ball	Gaelic football	Basque pelota	Street hockey
Beach Volley	Jorkyball	Pesäpallo (Finnish baseball)	Tchoukball
Beach Soccer	Handball	Polo	Touch rugby
Bouzkachi	Indoor hockey	Ringette	Town ball
Calcio florentin	Underwater hockey	Rink hockey	Ultimate
Camogie	Lawn hockey	Roller derby	Floor hockey (Floorball)
Cricket		Inline hockey and roller hockey	Vigoro
Lacrosse	Horseball	Rounders	Volleyball
Lacrosse	Hurling	7-a-side rugby	Volata
Curling	Kin-ball	Rugby union	
Floorball	Korfball	Rugby league	
Football (or soccer)	Longue paume	Sepak Takraw	

Gymnastics

Acrosport	Artistic gymnastics	Trampolining	Majorettes
Aerobics	Rhythmic gymnastics	Tumbling	

Combined events

Triathlon	Modern pentathlon	Unifight	
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Racket sports

Badminton	Peloc	Racquetball	Squash
Jeu de paume	Basque pelota	Speed Badminton	Tennis
Padel	Racketlon	Speed-ball	Table tennis

Sports involving animals (NB. animals are not covered by Standard Multi-sports Insurance under any circumstances)

Dog agility	Camel racing	Dog sledding	
Rhythmic obe	Chariot racing	Horse racing	
Equestrian sports			
Sidesaddle riding	Dressage	Horseball	Pony games
Carriage driving	Endurance	Hunting	Show jumping
Traditional carriage driving	Camargue horse riding	Oulak	Ski joering
Complete competition	Icelandic riding	Polo	TREC
Doma Vaquera	Western horse riding	Polo-cross	Galloping acrobatics
Ancient sports			
Barres	Harpastum	Pankration	Camp
Florentine Calcio	Pall mall	Ancient pentathlon	Town ball
Chariot racing	Longue paume	Fist-fighting	Volata
Cycling			
BMX	Road cycling	Cyclo-cross	Chain-Bike
Artistic cycling	Cyclo-sport	Cycle tourism	
Track cycling	Cyclo-ball	Mountain biking	
Martial arts			
Aïkido	Jiu-jitsu brésilien	Kobudo	Taekwondo
Bando and Banshay	Judo	Krabi krabong	Unifight
Capoeira	Kalaripayatt	Muay-boran	Viet vo dao
Hapkido	Karate	Ninjutsu	Wushu (Kung Fu)
Ju-jitsu (jujutsu)	Kendo	Sumo wrestling	
Ice sports			
Bandy	Ice motorbike racing	Speed skating	
Curling	Ice dancing	Ringuette	
Short-track	Figure skating		
Strength sports			
Bodybuilding	Basque strength events	Highland Games	Tug of war
Fitness	Weightlifting	Powerlifting	
Open air and outdoor sports			
Ultra-trail	Deepelling	Outdoor expedition	
Canyoning	Tree climbing	Walking	
Orienteering race	Sport fishing		
Target sports			
Ball-trap	Curling	Shuffleboard	
Breton boules	Ice-stick shooting	French bowls	Boules (Lyon boules)
Boulingrin	Darts	Boule de fort	Shooting
Boomerang	Golf	Nine pins	Archery
Bowling	Jukskei	Sarbacane (shooting)	
Croquet	Paintball	Sarbacana	
Billiards			
Pool	English billiards	French billiards	Snooker
Hybrid sports			
Universal football			
Water sports			
Rowing	Underwater hockey	Windsurfing	Sailing
Lifeboating	Water jousting	Subaqua diving	Water-polo
Dragon boating	Kayak-polo	Diving	Wakeboard
Canoeing and kayaking	Fin swimming	Rafting	
Canyoning	Swimming	Subaqua rugby	
Land sailing	Synchronised swimming	Waterskiing	
	Sport fishing	Surfing	

Sliding and board sports

Skiing (off-piste NOT COVERED if the authorities have issued avalanche warnings of between 3 and 5)

Biathlon	Alpine skiing	Grass skiing
Nordic combined skiing	Freestyle skiing	Telemark skiing
Snowboard	Kitesurf	Freestyle skiing

New sliding and board sports

Bodyboard	Kite-skiing	Rollerblading	Streetboard
Freebord	Snow-kiting	Skateboard	Surfing
Surf kayaking	Longskate	Snowboard	Ice sailing

Other sports

Speedcubing	Sport dancing	Nordic walking
Chess	Main à main acrobatics	E-sports
Footbag	Sport stacking	

EXTREME SPORTS NOT COVERED BY MULTI-SPORT INSURANCE

None of the sports listed below are covered by the MULTISPORT contract.

Air sports

Aerial ballet	Bungee jumping	Ski jumping	Sky flying
Base jump	Tightrope walking	Sky surfing	

Land sports

Speed skiing	Aggressive rollerblading	Extreme skiing	Sandboard
Extreme motocross	Caving		Speed biking
Street tobogganing	Mountainboard	Mountaineering	

Water sports

Barefoot waterskiing	Watercraft	Round the world race	
Speed sailing	Open water swimming	Scuba diving	High diving or cliff diving
Apnea	Offshore power boat racing		

Ice sports

Bobsleigh	Olympic Luge	Skeleton
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Sports with animals

Hunting of dangerous animals

In case of legal problems with this contract, only the French version will be taken into consideration.

ASSUREVER

TSA 72218 - 18039 BOURGES CEDEX

N° Tel : 01 73 03 41 01

SARL (French limited liability company) with a share capital of €516,500 -
company registration number RCS Paris B 384.706.941

Insurance brokerage and management company

Professional civil liability financial and insurance guarantee provided
In accordance with Articles L 530-1 and L 530-2 of the Insurance Code



The insurance and assistance guarantees stipulated in this document have been taken out with MUTUAIDE ASSISTANCE, under the number 9291.

NOTES

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ASSUREVER assure vos voyages

ASSUREVER, leader français du courtage dans le domaine du voyage, a toujours privilégié la place du client et l'innovation au cœur de son développement avec une seule ambition : assurer vos voyages en toute sérénité.

ASSUREVER conçoit, gère et distribue des solutions spécialisées d'assurance en voyage, responsabilité civile professionnelle, flotte autocars et automobiles, santé-prévoyance, dommage aux locaux, ainsi que des prestations d'assistance et d'assurance pour les particuliers, les professionnels et les entreprises.

Avec 55 collaborateurs, ASSUREVER vous accompagne au quotidien.

ASSUREVER

L'EXPERIENCE :

ASSUREVER est depuis plus de 30 ans un courtier d'assurances national indépendant, spécialiste de la création, de la distribution et de la gestion de contrats d'assurance et d'assistance dans le secteur du tourisme. Ce statut de courtier lui permet de travailler avec les meilleures compagnies d'assurance.

LA PERFORMANCE :

En 2019, ASSUREVER a assuré plus de 1,5 million de personnes dans le monde entier et géré plus de 20 000 cas d'indemnisations.

NOS ENGAGEMENTS :

- Vous guider dans vos choix de garanties
- Vous protéger au plus près de vos besoins
- Vous accompagner avant et pendant votre séjour

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VOTRE AGENCE DE VOYAGES



TSA 72218
18039 BOURGES CEDEX
Tél : 01 73 03 41 01
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S.A.R.L. au capital de 516 500 € - RCS Paris B 384.706.941
Société de courtage et de gestion d'assurance immatriculée à l'ORIAS
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