SPECIAL CONDITIONS:

INSURED PERSONS
The participants in one or more trials of the Gay Games and who have subscribed to the contract N°ADP20181518.

SCOP OF APPLICATION OF COVERS
Cover under this contract shall apply world-wide, exclusively for the Gay Games organized by Paris 2018 which run from 08/04/2018 to 08/12/2018.

Cover shall take effect from the time the Insured leaves the workplace or his/her domicile to go to the Gay Games, and terminates on his/her return to the first of workplace or home, provided that his departure and arrival occur between 08/03/2018 and 08/13/2018 included.

Cover shall attach twenty four hours a day during the whole duration.

Extension 1: Guarantees are acquired to the Insured up to 15 days before the start of the event ie from 07/18/2018 to 08/13/2018.

Extension 2: Guarantees are acquired to the Insured, up to 15 days after the end of the event ie from 08/03/2018 to 08/27/2018 included.

NATURE AND AMOUNT OF COVER

❖ ACCIDENTAL DEATH: €30,000

❖ TOTAL PERMANENT DISABLING FOLLOWING AN ACCIDENT: €80,000
  Reducible in case of PARTIAL PERMANENT DISABLING according to the company Disability Scale below
  SIMPLE DEDUCTIBLE
  Any accident guaranteed under this contract resulting in a partial PERMANENT DESCABLEMENT of less than or equal to 5% will not give rise to the payment of any compensation.
  However, for any disability greater than 5%, no deductible will be applied.

❖ MEDICAL FEES following an accident: up to €5,000
  ABSOLUTE DEDUCTIBLE: €100 per event.

❖ ASSISTANCE GUARANTEES: see Table of Cover below

UNDERTAKING
If several insured persons are accident victim during the same guaranteed event, the total amount of the indemnities that the Insurer will pay cannot exceed €5,000,000.

If the total of the individual indemnities due for each of the accident persons Insureds exceeded this sum, each individual indemnity will be proportionally reduced and paid to the "marc l'Euro" according to the guaranteed capital for each of the victims.
General Conditions valid Insurance Information Notice in accordance with the L141-4 article of the French insurance Code

<table>
<thead>
<tr>
<th>TABLE OF COVER</th>
<th>Cover</th>
<th>Sums insured</th>
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<tbody>
<tr>
<td><strong>Assistance</strong></td>
<td></td>
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<tr>
<td>Repatriation:</td>
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<tr>
<td><em>In the event of Illness or Accident</em></td>
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<tr>
<td>Repatriation and medical transport</td>
<td></td>
<td>Actual costs</td>
</tr>
<tr>
<td>Medical, surgical, pharmaceutical expenses, the cost of a hospital</td>
<td></td>
<td>Up to €30 000 (Not combinable with “Medical Fees” above)</td>
</tr>
<tr>
<td>(Reimbursement of actual cost - Advance on Hospitalisation expenses- without time limitation - )</td>
<td></td>
<td>€200 per tooth with a maximum of €600 per claim</td>
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<tr>
<td>With an inner limit for Dental Costs</td>
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<tr>
<td>Accompanying the insured following repatriation/transportation</td>
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<td>Travel tickets</td>
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<tr>
<td>Return of Spouse and Dependent Children in the event of repatriation of the insured</td>
<td></td>
<td>Actual costs</td>
</tr>
<tr>
<td>Presence with Insured while hospitalised</td>
<td></td>
<td>Travel tickets *+ hotel expenses €150 per night – maximum €1 500</td>
</tr>
<tr>
<td>Prolonged stay</td>
<td></td>
<td>Up to €150 per day with a maximum of €1 500</td>
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<td>Hotel expenses</td>
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<td>Delivering messages</td>
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<td>Actual costs</td>
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<td>In the event of Death</td>
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<td>Actual costs</td>
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<tr>
<td>Repatriation of corpse in the event of Death</td>
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<td>€2 500</td>
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<tr>
<td>Coffin expenses</td>
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<tr>
<td>Accompanying the deceased, up to two members of the family</td>
<td></td>
<td>Travel tickets* + hotel expenses €150 per day and per person – maximum 5 days</td>
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<tr>
<td>Assistance and service to the company and to the Insured:</td>
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<tr>
<td>Premature return</td>
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<tr>
<td>- In the event of death or hospitalisation of a close relative</td>
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<td>Travel ticket one way*</td>
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<tr>
<td>- In the event of accident or serious illness of a member of the Insured’s family</td>
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<td>- In the event of the premature birth of a dependent child</td>
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<tr>
<td>- In the event of major property damage a the Insured’s domicile</td>
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<tr>
<td>- In the event of serious property damage occurring at the Policyholder’s premises</td>
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<tr>
<td>- In the event of loss,, theft or destruction of samples, demonstration equipment or prototypes required for the completion of the trip.</td>
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<tr>
<td>Sending a doctor to the site</td>
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<td>Actual costs</td>
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<tr>
<td>Sending a doctor in the event of illness or accident of a child remaining at the Insured’s domicile</td>
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<td>Actual costs</td>
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<tr>
<td>Sending medicines</td>
<td></td>
<td>Actual costs</td>
</tr>
<tr>
<td>Advancing bail bond</td>
<td></td>
<td>€20 000</td>
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<tr>
<td>Legal assistance (lawyer’s fees)</td>
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<td>€5 000</td>
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<tr>
<td>Forwarding professional documents</td>
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<td>Postal and delivery charges</td>
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<tr>
<td>Assistance with passport or identity papers</td>
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<td>Assistance and Advice</td>
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<tr>
<td>Loss or theft of means of payment</td>
<td></td>
<td>Assistance and Advice + Advance funds of up to €2 000</td>
</tr>
<tr>
<td>Child custody for children less than 16 years of age</td>
<td></td>
<td>€500 for the whole service</td>
</tr>
<tr>
<td>Information on useful services for managing handicap and assistance in re-adaptation to everyday life</td>
<td></td>
<td>Informations and Services</td>
</tr>
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PART 1 – GENERAL PROVISIONS

1 – CONCERNED BY THE CONTRACT
Insured(s): The participants in one or more trials of the Gay Games organized by Paris 2018 which run from 08/04/2018 to 08/12/2018 and who have subscribed to this contract

Insurer: Groupe Special Lines on behalf of GROUPAMA Rhône-Alpes Auvergne. Agricultural Mutual Insurance Regional Fund for Rhône-Alpes Auvergne 50 rue de Saint-Cyr - 69251 Lyon cedex 09 - N° de SIRET 779 838 366 000 28 Company governed by the French Insurance Code and subject to the Prudential and Resolution Control Authority, 61 rue Taïbout - 75009 Paris. If the contract is written on a coinsurance basis: GROUPAMA RRA, leading underwriter and co-insurance companies.

Service provider: Mutuaide Assistance 8-14 Avenue des Frères Lumière 94368 BRY-SUR MARNE cedex – S.A. with a capital of 9,590,040 € fully paid up – Company governed by the French Insurance Code, entered in the Trade and Companies Registry under the reference RCS 383 974 086 Créteil and subject to the Prudential and Resolution Control Authority, 61 rue Taïbout - 75009 Paris

Policyholder The legal entity or natural person, designated in that capacity in the Special Conditions who signs the contract and undertakes to pay the premiums.

2 – GENERAL DEFINITIONS
Accident: Any involuntary bodily injury on the part of the victim arising from the sudden action of an exterior cause. By extension to this definition, cover shall apply to pathologies which are the direct consequence of this bodily injury

Equivalent to accidents: The following are considered as equivalent to accidents:
- injuries caused by fire, steam jets, acids and corrosives, lightning and electric current;
- asphyxia through immersion and asphyxia through unintended absorption of gas or fumes;
- the consequences of poisoning and bodily injuries due to unintentional absorption of toxic or corrosive substances;
- cases of heat stroke, congestion and freezing following ship-wreck, forced landings, collapse, avalanche, flooding or any other events of an accidental nature;
- the direct consequences of animal bites or insect stings excluding illnesses (such as malaria and sleeping sickness) whose origin can be connected to such bites or stings;
- injuries that may arise from the practice of scuba diving, including those due to immersion syncope or decompression;
- bodily injury resulting from assault or attack of which the insured is victim, unless it is proved that he/she has taken an active part as author or instigator of these events;
- The physiological consequences of surgical operations on condition that they were necessitated by an accident included in the cover;
- Accidental fall not resulting from a health problem.

Not equivalent to accidents: The following shall not be considered the equivalent to accidents:
- a ruptured aneurysm, myocardial infarction, cerebral embolism, epileptic attack, meningeal haemorrhage.

Year of insurance: The period between two main premium due dates. However:
- if the inception date of the contract is different from the date of the main due date, the first insurance year is the period between the inception date and the first main due date.
- If the contract expires or terminates between two main due dates, the last insurance year is the period between the last main due date and the date of expiry or termination of the contract.

Beneficiary(ies): The person or persons who receive the sums due under a claim from the Insurer.

In the event of death of the Insured, unless another person has been designated by the Insured, the sum provided for shall be paid:
- if the INSURED is married: to his/her spouse or spouse not legally separated at fault, or divorced, failing that to his/her children born or unborn, living or representing, failing that his/her heirs,
- if the INSURED has signed a pact of civil solidarity (« PACS »), his/her partner, failing that his/her heirs,
- if the INSURED is widowed or divorced: his/her children, failing that his/her heirs,
- if the INSURED is single: his/her heirs.
In all other cases, the other sums shall be paid to the Insured, victim of the accident.

Spouse:
- The person linked to the Insured through marriage and not legally separated;
- Partner: the person who has been living in a marital relationship with the Insured for at least 6 months and with the same community of interests as a married couple.
- The co-signatory of a Civil Pact of Solidarity with the Insured.

Consolidation:
Date from which the state of the Insured following an accident is considered as medi-

cally stabilized while there are permanent after-effects.

Forfeiture:
Deprivation of the right to sums or services provided for in the contract following the insured’s failure to respect certain obligations laid down by the Laws and Regulations in force.

Domicile: country of customary residence
The Insured’s country of customary residence or country of origin. Country of origin shall refer to the country of the Insured’s nationality. The fiscal address shall be considered as the domicile in the event of dispute.

Bodily injury:
Any physical damage sustained by a person.

Consequential financial loss:
Any pecuniary loss resulting from loss of enjoyment of a right, the interruption of a service given by a person or by real or personal property or the loss of a profit, resulting directly from the bodily injury or property damage covered.

Property damage:
Any impairment, deterioration, loss and destruction of a thing or a substance including any physical impairment to animals.

Dependent children:
Children are considered as being dependant only in the cases mentioned as follows:
- if they are less than 21 years of age,
- if they are over the age of 21 and less than 25 years of age and they are pursuing their studies. Their income or remuneration they possibly receive annually must be less than the minimum taxable amount under the personal income tax system (I.R.P.P.),
- if they are disabled (unable to support themselves, whatever their age)
- if they are conceived and born viable within Three Hundred Days following the date of the accident which caused the death of the INSURED.

Harmful event:
The harmful event is the cause which generated the damage.
A series of harmful events with the same initial cause is the equivalent of a single harmful event.

Deductible:
The sum set at a flat rate and which remains payable by the Policyholder or the Insured in the case of indemnification. The deductible may also be expressed in days or in percentage.

Civil war:
Civil war shall mean two sparring factions of the same nation who oppose each other or a part of the population who is opposed to established order. These forces control part of the land and have regular armed forces.

**Foreign war:**
Foreign war shall mean a state of armed struggle between two or more Nations with or without declaration of war.

**Permanent disability:**
This is an Impairment of the Insured’s physical capacity that is presumed permanent. Its scale is measured by a rate determined by reference to the table provided in the Special Conditions.

**Illness:**
Any health impairment certified by a qualified medical practitioner, provided that it becomes evident for the first time during the contract.

**Foreign countries:** Any country, land or possession other than metropolitan France and Corsica. By convention, the French Overseas Departments and Territories (« DOM-TOM ») French Overseas Countries and Lands (« PTOM ») and Overseas Authorities (« COM ») are equivalent to Foreign Countries for application of the Medical Expenses cover.

**Claim:** A claim shall mean any request for compensation made out of court or through the judicial process by a third party or his/her assigns and addressed to the Insured or his/her insurer.

**Loss:** Manifestation of damage for the injured third party when damage is likely to lead to application of cover under the contract. All damage resulting from the same initial cause shall be considered as one and the same loss. Any damage or series of damages caused to third parties that involve the Insured’s liability shall also be considered a loss.

**Third party:** Any legal entity or natural person with the exclusion of:
- The Insured himself/herself, the members of his/her family, as well as their ascendants and descendants and persons accompanying them.
- Agents and servants, salaried or unsalaried staff while acting within the scope of their employment.

**SUBJECT MATTER OF INSURANCE**
The contract is intended to cover the payment of the indemnities defined hereafter the amount of which is set in the Special Conditions, in the event of physical accident which may affect the Insured.

**EXCLUSIONS COMMON TO ALL COVERS**

**ACCIDENTS CAUSED OR INTENTIONALLY BROUGHT ABOUT BY THE INSURED, THE CONSEQUENCES OF HIS/HER SUICIDE WHETHER COMMITTED OR ATTEMPTED, 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/HER BLOOD ALCOHOL LEVEL IS HIGHER THAN THAT LEGALLY ALLOWED IN THE COUNTRY WHERE THE ACCIDENT TOOK PLACE**

**ACCIDENTS RESULTING FROM THE INSURED’S PARTICIPATION IN A BRAWL (EXCEPT IN THE CASE OF LEGITIMATE DEFENCE OR ASSISTANCE TO A PERSON IN DANGER) A DUAL, AN OFFENSE OR A CRIMINAL ACT.**

**ACCIDENTS ARISING WHEN USING A CRAFT AS A PILOT OR MEMBER OF THE CREW TO MOVE THROUGH THE AIR OR DURING THE PRACTICE OF SPORTS PRACTISED WITH OR FROM THESE CRAFT.**

**ACCIDENTS CAUSED BY PRACTISING SPORT IN A PROFESSIONAL CAPACITY AND THE PRACTICE OF A SPORT EVEN ON AN AMATEUR BASIS OF ANY SPORTS REQUIRING THE USE OF MOTOR-DRIVEN MECHANICAL EQUIPMENT, WHETHER AS A PILOT OR PASSENGER. PRACTICE OF A SPORT SHALL MEAN TRAINING, TRIALS AS WELL AS PARTICIPATION IN SPORTING EVENTS OR COMPETITIONS.**

**ACCIDENTS CAUSED THROUGH CIVIL OR FOREIGN WAR, WHETHER DECLARED OR NOT IN ONE OF THE FOLLOWING COUNTRIES: AFGHANISTAN, NORTH KOREA, EGYPT, HONDURAS, IRAQ, LIBYA, MALLI, NIGERIA, PAKISTAN, PAPUA-NEW-GUINEA, REPUBLIC OF CENTRAL AFRICA, DEMOCRATIC REPUBLIC OF THE CONGO, SOMALIA, SOUDAN, SOUTH SUDAN, SYRIA, REPUBLIC OF CHAD, PALESTINIAN TERRITORIES (GAZA), UKRAINE (THE LENGTH OF THE FRONTIER WITH RUSSIA), VENEZUELA, YEMEN. HOWEVER THE RISKS OF WAR OCCURRING IN ONE OF THESE COUNTRIES MAY BE COVERED WITH AN ADDITIONAL PREMIUM AND ON PRIOR REQUEST.**

**ACCIDENTS DUE TO IONISING RADIATION EMITTED BY NUCLEAR FUEL OR BY RADIOACTIVE PRODUCTS OR WASTE OR CAUSED BY WEAPONS OR DEVICES DESTINED TO EXPLODE THROUGH MODIFICATION OF THE STRUCTURE OF THE NUCLEUS OF THE ATOM.**

**TERMINATION OF COVER**
In all events, cover shall terminate for every Insured:
- On the date of cancellation of the contract.
- On the date the Insured ceases to form part of the closed insured group.
- On expiry of the insurance year during which the Insured has reached the Age of Seventy.

**PART 2 – INSURANCE COVERS AND ASSISTANCE SERVICES**

**1 – PERSONAL ACCIDENT COVERS**

**BASIC COVERS**

**ACCIDENTAL DEATH**
When the Insured is the victim of an Accident and deceases from its after-effects within Twenty Four Months of its occurrence, the Insurer shall pay the sums given in the Special Conditions.
- The officially recognised disappearance of the Insured’s corpse following the wrecking, disappearance or destruction of the means of transport in which he/she was travelling will create presumption of death on expiry of a period of one year from the date of the accident.
Cover attaches on presentation of a declaratory judgement of death. However, if it ascertained that at any time following payment of the indemnity for the disappearance of the Insured that he/she is still alive, we shall be fully reimbursed for the sums unduly paid for this reason.

**ACCIDENTAL PERMANENT Disablement**
When the accident leads to permanent disablement, we shall pay the Insured an indemnity the amount of which is obtained by multiplying the sum given in the Special Conditions by the rate of disability as defined in the table given in the Special Conditions.
Additional indemnities described may be granted according to the following situations:
If the disablement is only partial, the Insured shall only be entitled to a proportion of the indemnity according to the degree of disablement.
Disabilities not listed shall be indemnified according to their severity compared to that of those listed.
The indemnity is a flat sum of a contractual nature: it is determined according to the rules set down above, without taking into account the age or the profession of the Insured.
The degree of disablement shall be established when the final consequences of the accident can be determined in a conclusive manner and at the latest, unless otherwise agreed between us and the Insured, on expiry of the period of one year from the date of the accident.
There shall be no aggregation of the death and disablement covers when they result from the same accident.

❖ The case of Multiple Disabilities
When the same accident produces several distinct disabilities, the main disability is first evaluated according to the above conditions. The other disabilities are then as-
sessed in proportion to the remaining ca-
pacity after addition of previous capacities, the overall total not being in excess of 100%. Total functional incapacity of a limb or organ is equivalent to the loss of this limb or or-
gan.

The loss of useless limbs or organs before the accident shall not give rise to an indem-
nity. If the accident affects a limb or an organ that is already disabled; the indemnity shall be determined by the difference be-
tween the state before and after the acci-
dent. Evaluation of the injuries following the accident shall under no circumstances be increased by the state of infirmity of the limbs or organs not concerned by the acci-
dent.

Nervous disorders and injury to nerves can only be taken into consideration, provided that they are the consequence of an insured accident, if on examination they show clearly marked clinical signs.

**MEDICAL FEES**

Payment to the Insured of an indemnity corresponding to the medical, surgical, pharmaceutical costs, hospital and clinic costs and those for transport by ambulance or other vehicle in the case of emergency caused by an accident insured under the contract.

If the insured person benefits from Social Security or other benefit plans covering the same risks, in addition to the sums paid by these covers, the Company shall pay the services it insures provided the person insured does not receive a sum in excess of that of its true disbursement.

It is however stated that the cost of den-
tal prostheses following an accident shall be limited to €300.

**ADDITIONAL COVERS**

Provided that the conditions set out below are all met, the “HEART ATTACK” will be considered as an event likely to trigger the application of the “DEATH” guarantee pro-
vided for under this contract. provided that a
INSURED will be the victim of his very first heart attack, (that is to say, when this unpre-
dictable heart-related event appears for the very first time, while the INSURED has never had the slightest warning of this type before, or never had the need or the medical need to be treated beforehand for this type of affection).

This specific guarantee, usually covered by the “HEALTH” Insurance, will be taken into account under this contract, provided that it can be medically proven, or at least it can be advanced with a near certainty, by the docs-
tors:

a) that this 1st heart attack is due according to all presumptions to an external phenom-
enon independent of the state of health of the INSURED (example: an intense psycho-
logical or emotional cause, or a climatic phenomenon marking, etc.)

b) that it resulted in the immediate death of the INSURED, or at the latest within three
months of its first medical finding.

**SPECIFIC DEFINITIONS regarding the assistance services**

**Beneficiary:** The Insured for which the insurance Covers and/or the assistance Services may be implemented.

**Decider:** Person or company that has the power leadership, decision and control within the company and/or its subsidiaries.

**Domicile:** Place of the main, customary residence that may be prior to departure on displacement:
- in metropolitan France and in European Union countries, as well as in Switzerland and Norway.
  (The principalities of Andorra and Monaco are included in this definition)

By extension, the place of residence may be in countries other than those mentioned above; Countries where an Insured resides (or his/her subsidiaries if this is provided for in the Special Conditions).

**Illness:** Change in health ascertained by a medical authority, requiring medical care and a complete halt to any professional activity or other activity.

**Chronic illness:** illness that evolves slowly and continues.

**Serious illness:** illness that may be life-
threatening.

**Members of the family:** By members of the family, we refer to the spouse or partner living under the same roof, a child, a brother or sister, the father, the mother, in-laws, grandparents, grandchildren, great grand-
children, brother in-law, sister in-law.

**Territoriality:**

**Worldwide**, without kilometrical deductible (without agreement to the contrary written in the Special Conditions).

**Time limit:** The assistance product has the same time limit as the insurance contract to which it is related (Special Conditions).

**IN THE EVENT OF SICKNESS OR ACCIDENT**

**Repatriation or medical transportation**

If the state of the Insured requires medical care or specific examination that cannot be carried out in situ. GROUPAMA ASSISTANCE shall organise and pay for:
- either the transport to a central regional hospital or a country able to provide treat-
ment;
- or the repatriation to the Insured’s Domic-
icle if there is not a suitable medical centre closer by.

Depending on the seriousness of the case, the repatriation or transport shall be carried out under medical surveillance if necessary by the following most appropriate means:
medical aircraft, regular aeroplane, train, sleeper, boat, ambulance.
In the case where hospitalisation on arrival is not vital, transport to the Insured’s domicile shall be provided.
If hospitalisation could not be arranged in an establishment close to the Insured’s domicile, GROUPAMA ASSISTANCE shall organise and pay for the transport from this hospital to domicile, as and when his/her state of health allows.

**Reimbursement of medical, surgical, pharmaceutical costs and the cost of hospitalisation incurred abroad**
Reimbursement covers the costs defined below, provided that they concern treatment received outside the country of the Insured’s domicile, following an unforeseeable illness or an accident occurring abroad.
GROUPAMA ASSISTANCE shall reimburse the amount of medical costs incurred abroad and remaining the responsibility of the Insured after reimbursement by the Social Security or any other benefits plan to which he/she subscribes, up to the sum given in the Special Conditions and for the duration of the contract.
If there is a deductible (provided for in the Special Conditions) the amount of which is given in this same table, this deductible shall apply in every case.
The Insured or his/her assigns undertake to all the necessary steps to recover these costs from the welfare agencies and to forward to us the following documents:
- original statements from the welfare and/or benefits agencies justifying the reimbursements obtained;
- photocopies of treatment bills justifying the expenses incurred.

**Nature of medical expenses conferring the right to additional reimbursement**
- Medical fees.
- Cost of medicines prescribed by a doctor or surgeon.
- Cost of ambulance or taxi ordered by a doctor for a local journey.
- Hospitalisation costs on medical decision.
- Dental emergency within the limit of the amount given in the table of covers.
Cover for medical expenses shall cease on the date that Groupama Assistance is able to carry out the repatriation of the Insured to metropolitan or to the country of his/her domicile.

**Advance on hospitalisation costs**
When an Insured is hospitalised, an advance can be made of the hospital fees within the limit of the sum insured under additional reimbursement of medical expenses, subject to the following conditions:

- that the treatment is prescribed in agreement with the doctors of GROUPAMA ASSISTANCE, and
- that the Insured is judged not transportable on decision of these same doctors.
No advance shall be made from the date when transport is possible.
In every case, the Insured shall undertake to reimburse the sums received from the social organisations at the latest thirty days after receipt of the invoice.

**Accompaniment during repatriation or medical transport**
If the Insured is transported according to the conditions defined in paragraph « Repatriation or medical transport », and if he/she is not accompanied by a doctor or a nurse, GROUPAMA ASSISTANCE shall organise and on medical prescription pay for a person in situ to accompany the Insured.

**Return of the accompanying Spouse and Dependent Children in the event of repatriation of the event of the Insured**
GROUPAMA ASSISTANCE shall organise and pay for the return of the Spouse and Dependent Children in the event of repatriation of the Insured to his/her Domicile when the means of transport initially planned can no longer be used due to this repatriation.
Repatriation as well as the most suitable means are decided and chosen by GROUPAMA ASSISTANCE.

**Presence alongside the insured that is hospitalised**
GROUPAMA ASSISTANCE shall organise and pay, up to the amount given in the Special Conditions, for the cost of a hotel for a person to be at the Insured’s bedside while hospitalised and whose state does not justify or prevents immediate repatriation.
GROUPAMA ASSISTANCE shall also pay for the return to metropolitan France of this person (or his/her country of Domicile) if he/she cannot use the means of transport originally planned.
If hospitalisation exceeds 10 days, and if the person does not stay at the Insured’s bedside, GROUPAMA ASSISTANCE shall pay for the cost of transport from metropolitan France to the Insured’s Domicile (by train 1st class or by aeroplane in economy) for a person designated by the Insured.
GROUPAMA ASSISTANCE shall also organise and pay for a hotel for this person up to the amount given in the Special Conditions.

**Prolonging the insured’s stay**
If the state of health of the Insured does not require hospitalisation and his/her state of health prevents repatriation and that the planned duration of the cover has come to an end, GROUPAMA ASSISTANCE shall pay for the cost involved in prolonging the Insured’s stay up to the amounts given in the Special Conditions.

**Nature of costs for prolonging the Insured’s stay giving the right to reimbursement**
- Accommodation or hotels
- Catering

**Delivery of messages**
GROUPAMA ASSISTANCE shall deliver private messages for the Insured’s attention when he cannot be reached directly, for example, in the event of hospitalisation or left by him for the attention of his family

**SERVICES IN THE EVENT OF DEATH**
**Transport of the corpse**
GROUPAMA ASSISTANCE shall organise and pay for the transport of the Insured’s corpse from where the body is laid in the coffin to the place of burial in metropolitan France or the Domicile of the Insured.
GROUPAMA ASSISTANCE shall pay for the ancillary expense required to transport the corpse, including the cost of a coffin up to the amount given in the Special Conditions.
Incidental costs, ceremony, burial or cremation in metropolitan France or in the country of the Insured’s Domicile are to be borne by the families.
When there is a temporary burial, GROUPAMA ASSISTANCE shall organise and pay for the cost of transport of the body to the place of final burial in metropolitan France or the Insured’s Domicile following expiry of the legal period for exhumation.

**Accompaniment of the deceased (up to two members of the family)**
GROUPAMA ASSISTANCE shall organise and pay for the return to metropolitan (or the country of the Insured’s Domicile) to the place of burial, of 2 other Insureds who are in situ if they are unable to return by their initially planned means.
In the event where administrative reasons impose a temporary or final burial in situ, GROUPAMA ASSISTANCE shall organise and pay for the transport to and from his/her domicile (by train 1st class or by aeroplane in economy) for one member of the family to go from his/her domicile in metropolitan France (or in another country where the Insured resided) to the place of burial, as well as his/her stay in a hotel.
GROUPAMA ASSISTANCE shall also organise the stay in a hotel for the member of the family who has to travel and shall pay for the
actual cost up to the amount given in the Special Conditions.

ASSISTANCE – HELP & SERVICES

Premature return
If the Insured has to interrupt his/her journey:
- in order to attend the funeral of a member of his/her family (spouse or partner, direct ascendant or descendant, brother, sister, GROUPAMA ASSISTANCE shall organise and pay for the transport (by train 1st class or by aeroplane in economy) of the Insured from the place he/she is staying to the place of burial in metropolitan France or in another country if the Insured has his/her Domicile there.
- in the event of an unforeseeable and serious accident or illness affecting a member of his/her family (spouse or partner, direct ascendant or descendant) GROUPAMA ASSISTANCE shall organise and pay for, in agreement with the doctor from GROUPAMA ASSISTANCE, the transport (by train in 1st class or by aeroplane in economy) of the Insured to enable him/her to come to the bedside of the close relative, in metropolitan France or country of the Insured’s domicile.
- in the event of the premature birth of a dependent child, GROUPAMA ASSISTANCE shall organise and pay for, following the agreement of the doctor from GROUPAMA ASSISTANCE, the transport (by train 1st class or aeroplane in economy) of the Insured to enable him/her to come to the bedside of the new-born child, in metropolitan France or country of the Insured’s domicile.
- in the event of major property damage arising at the Insured’s domicile or for company heads in company premises that have been destroyed by more than 50% and imperatively require his/her presence on site, GROUPAMA ASSISTANCE shall organise and pay for the transport (by train 1st class or aeroplane in economy) of the Insured to enable him/her to get back to his/her domicile or premises of his/her company.
- in the event of the loss, theft or destruction of samples, demonstration equipment or prototypes of products required to complete his/her trip successfully, GROUPAMA ASSISTANCE shall organise and pay for the transport (by train 1st class or aeroplane in economy) of the Insured to enable him/her to get back to his/her domicile or premises of his/her company.

Following the premature return of the Insured, GROUPAMA ASSISTANCE shall organise and pay for the transport (by train 1st class or aeroplane in economy) of the Insured to the place he is staying to enable him/her to enable the return of his vehicle or the other Insureds by initially planned means.

Sending a doctor out on site
If the state of the Insured so requires and if the circumstances demand it, GROUPAMA ASSISTANCE may decide to send a doctor or a medical team on site to better judge the measures to be taken and to organise them.

Sending a doctor in the event of illness or accident involving a dependent child who remains at the Insured’s domicile
In the event of Illness or Accident involving a Child who remains at the Insured’s domicile, and if the Insured and his/her Spouse is Abroad, GROUPAMA ASSISTANCE shall organise and pay for a doctor to visit the Dependent Child.

Dispatching medicines
GROUPAMA ASSISTANCE shall take every measure to ensure that medicine essential for the Insured’s current, continued treatment be found and sent if an unforeseeable event prevents the Insured from obtaining their equivalent. The cost of these medicines shall remain the responsibility of the Insured.

Advance of a bail bond and payment of the cost of a lawyer
This cover attaches only outside the country of the Insured’s domicile.

If in the event of the unintentional infringement of legislation of the country in which he is, the Insured is forced to pay a bail bond, GROUPAMA ASSISTANCE shall make the advance up to the amount given in the Special Conditions, against an acknowledgement of debt signed by the Insured.

GROUPAMA ASSISTANCE shall settle the lawyer’s of the legal representatives to which he/she can turn, up to the amount given in the Special Conditions.

The Insured shall undertake to reimburse the advance made for the bail bond within a period of thirty days from the date the funds were made available.

This benefit does not cover the legal consequences arising in the Insured’s country of origin following the events incurred abroad.

Intentional offences shall not entitle the Insured to the benefits « Advance of bail bond » and « Payment of lawyer’s fees ».

Forwarding professional documents
GROUPAMA ASSISTANCE shall cover the reimbursement of postal charges to send any document or professional material which has been forgotten, stolen or destroyed up to the amount given in the Special Conditions.

Assistance in the event of theft, loss or destruction of papers or means of payment
In the event of loss, destruction or theft of papers, GROUPAMA ASSISTANCE shall provide advice on the steps to be taken (lodging a complaint, renewal of papers, etc).

In the case of theft or loss of means of payment (credit card, cheque book), GROUPAMA ASSISTANCE shall grant an advance of funds with payment of the corresponding sum by a third party and following the prior agreement of the financial organisation issuer of the payment document, up to the amount given in the Special Conditions, to enable payment of basic necessities.

Information on services required for managing handicap and assistance in re-adaptation to everyday life
In the event of disablement in excess of thirty three percent, acknowledged and indemnified by the Insurer of this Contract, GROUPAMA ASSISTANCE shall organise without paying for the services of occupational therapists and habitat professionals faced with disablement, seeking to assess the adaptation of the Domicile to the Insured’s Disablement and to provide advice in terms of medical equipment and prosthesis.

Information on useful services for the management of handicaps:
- Information on social organizations, eligibility.
- Information on reimbursement of medical expenses and hospitalisation.
- Information on daily indemnities, steps to be taken with the employer.
- Information on annuities and disablement pensions.
- Information on family allowances funds, social assistance.
- Information on assistance for the handicapped.
- Information on useful telephone numbers in France.
- Information on addresses of various associations.
- Information on the adapting of habitat to the type of handicap and/or disablement of the Insured.
- Information on advice in terms of medical equipment and/or prostheses.
- Information on establishing contact with occupational therapists.
- Information on establishing contact with professionals dealing with adapting habitat.
- Information on social affairs.
For these covers, GROUPAMA ASSISTANCE shall only be responsible for an information service relating to the administration and French legislation strictly and only in metropolitan France.

**ASSISTANCE – BENEFIT EXCLUSIONS**

The following are excluded:

- Convalescence and disorders (illness, accident) in the course of treatment not yet consolidated.
- Pre-existing illness diagnosed and/treated having been the subject of hospitalisation in the six months preceding the request for assistance.
- Journeys taken for the purpose of diagnosis and/or treatment.
- Pregnancy, except in the case of complication and on all cases with effect from the thirty-sixth week of pregnancy.
- The states resulting from the use of drugs, narcotics and similar products and medically prescribed, the absorption of alcohol.
- The consequences of attempted suicide.
- Damage caused intentionally by the Insured or those resulting from his/her participation in a crime, an offence or a brawl, except in the case of legitimate defence.
- The events arising during the practice of dangerous sports (raiding, trekking, climbing...) or the participation of the Insured as competitor in sports competitions, bets, matches, contests, rallies or their preparatory trials, as well as the cost of all search expenses.
- The consequences of the wilful non-compliance with the regulations of the country visited or practices not authorised by the local authorities.
- The consequences of ionising radiation emitted by nuclear fuel or by radioactive products or waste or caused by weapons or devices destined to explode through modification of the structure of the nucleus of the atom.
- The consequences of civil or foreign war, attacks, official prohibitions, seizures or constraints by law enforcement authorities.
- The consequences of riots, strikes, piracy when the Insured takes an active part in such events.
- The consequences of impediments due to the weather such as storms and hurricanes.
- As well as the above exclusions, and for medical expenses, surgical, pharmaceutical or hospitalisation cover, the following shall not be covered:
- Costs arising from an accident or illness ascertained medically prior to the cover inception date.
- Costs incurred by the treatment of a pathological, physiological or physical state ascertained medically prior to the cover inception date, unless there is a clear and unexpected complication.
- Costs for internal, optical, dental, hearing, functional, aesthetic or other types of prostheses.
- Costs incurred in metropolitan France and in overseas departments or in the insured country of domicile, whether they are the result of an accident or illness arising in France or in another country.
- The cost of thermal spas, sun therapy, residence in rest homes, re-education expenses.

**ASSISTANCE – GENERAL METHODS OF INTERVENTION**

**FINANCIAL COMMITMENTS OF GROUPAMA ASSISTANCE**

The organisation by the Insured or by his/her entourage of one of the assistance services described above shall only give rise to reimbursement if GROUPAMA ASSISTANCE was previously informed.

The costs incurred shall be reimbursed on presentation of supporting documents within the limit of those that GROUPAMA ASSISTANCE would have incurred to organise the service. When GROUPAMA ASSISTANCE has to organise the premature return of the Insured to metropolitan France (or to the country of Domicile) he/she may be asked to use his/her travel documents.

When GROUPAMA ASSISTANCE has ensured the return of the Insured at its expense, the Insured shall be asked to take the necessary steps to reimburse the unused travel tickets and to pay the sum received to GROUPAMA ASSISTANCE within a period of three months from the date of return.

Only the expenses in addition to those the Insured would normally have incurred for his/her return to Domicile are the responsibility of GROUPAMA ASSISTANCE.

**INFORMATION FOR THE INSURED**

**THE CONTRACT IS SUBJECT TO FRENCH LAW AND THE REGULATIONS OF THE FRENCH INSURANCE CODE.**

**PART 3 – SETTLEMENT OF INDEMNITIES**

1 – DETERMINING THE CAUSES AND CONSEQUENCES OF THE ACCIDENT

The causes and consequences of an accident, the rate of disablement total or partial are ascertained by agreement between the parties, or failing this, by two doctors appointed by each of the parties. In the case of difference in opinion, a third doctor will be added to make a final decision. If they do not agree on the choice of the third doctor, or failure of one of the parties to appoint his/her adjutator, the appointment shall be made at the request of the most diligent party by the high court at the Insured’s domicile with a waiver of the oath and all other formalities.

Each party shall bear the cost of fees and expenses relating to the intervention of the doctor he/she has appointed. Those required by the intervention of the third doctor shall be shared equally between the parties.

If additional medical justification or documents are required, the Insured or his/her legal representative shall be personally informed by letter.

2 - WORSENING OF CONSEQUENCES UNRELATED TO THE ACCIDENT

When the consequences of an accident are worsened by the constitutional state of the victim, through a lack of care due to his/her negligence or by empirical treatment or a pre-existing illness and in particular by a diabetic or haematoic state, indemnities due shall be determined according to the consequences that the accident would have had on an able-bodied subject with normal health conditions and provided with rational treatment.

3 – CONTROL

The Insured is required to submit to an exam by doctors delegated by us. Our representatives shall be allowed to approach him/her when we feel it necessary, under penalty for the Insured or for any beneficiary to incur forfeiture of his/her rights if, without a valid reason, they refuse to allow control by our representatives or would hinder exercise of the control if, after notice is given forty-eight hours in advance by registered letter, we come up against persistent refusal or remain unable to carry out our control.

Any fraud, reluctance or false declaration on your part or that of the beneficiary of the indemnity, for the purpose of misleading us on the circumstances or con-
sequences of a claim, shall lead to loss of any right to indemnity for the claim in question.

4 - PAYMENT
The indemnities are payable:
- In the event of death and permanent disablement, within the period of one month following the provision of the supporting documents of the accidental death of the Insured and the capacity of the beneficiary or the agreement of the parties with regard to the level of disablement.
- In the event of application of the cover relating to the insurance of treatment fees and the cost of search and rescue, within the period of one month from the date the supporting documents were provided concerning the amount of expenses incurred reimbursable by us.
- Failure for the parties to agree, settlement of indemnities to reach agreement. Settlement of indemnities shall take place within a period of fifteen days with effect from the legal decision which has become enforceable.

PARTIE 4 - DOCUMENTATION REQUIRED FOR REIMBURSEMENT IN THE CASE OF CLAIM
In the event of a claim, it is important that we be rapidly and fully informed of the circumstances in which it occurred and its possible consequences.

FORM AND INFORMATION REQUIRED
The Insured and his/her assigns, as the case may be or any representative acting in their name shall be required to produce notification of any claim, in writing or verbally against receipt at our head office or with our representative designated in the contract, at the latest on the date they became aware of such claim.

If the claim’s notification is not made within the period set above, except in the case of force majeure, we can invoke forfeiture of the cover when we can establish that delay in notification caused us prejudice (article L.113-2 of the French Insurance Code)

Furthermore, together with this notification, they shall provide us with any information regarding the severity, the causes and circumstances regarding the claim and inform us, if possible, of the names and addresses of witnesses and those responsible.

IMPLEMENTATION OF COVERS
Any request for assistance shall be made directly by the INSURED, (or any person acting in his/her name) failing which it shall be inadmissible, by any of the following means:

By phone
For assistance:
Depuis la France : 01.45.16.64.85
Depuis l’étranger : (+33) 1. 45.16.64.85

For insurance:
Depuis la France : 01.41.02.06.98
Depuis l’étranger : (+33) 1.41.02.06.98

OBLIGATIONS IN THE EVENT OF A CLAIM
You shall notify Groupe Special Lines of your claim by writing to:
sinistres@groupe specials lines.fr, or by writing to the following address:
GROUPE SPECIAL LINES
SERVICE SINISTRES
6-8 RUE JEAN JAURES
92800 PUTEAUX,

And provide us with all the documents requested.
In the event these documents are not provided, you run the risk of forfeiture of your rights to indemnity.
The sums insured shall not be considered as proof of the value of the property for which you are requesting compensation, or as proof of the existence of this property.
You are required to justify by any means at your disposal and by any documents in your possession the existence and the value of this property at the time of the loss, as well as the existence and value of this property at the time of the loss and the extent of the loss.
If you knowingly use as justification inexact documents or use fraudulent means or make inaccurate or unwilling declarations you shall forfeit your rights to indemnity, without prejudice to the legal proceedings we would be entitled to take against you.

♦ For all Covers
- The number of the contract.
- Proof of his/her participation to the Gay Games

♦ For DEATH AND PERMANENT DISABLEMENT FOLLOWING AN ACCIDENT
- The written declaration giving the circumstances of the accident, the name of the witnesses and eventually the identity of the authority if a report was made, as well as the number of transmission.
- The doctor’s certificate, the surgeon’s certificate or that of the hospital called to give initial care and describing the injuries.
- The birth certificates of the children as well as copy of the tax declaration proving they are under the care of the Insured.
- Death certificate.
- Documents establishing the capacity of the Beneficiary in the event of death, the name and address of the notary in charge of the succession.

- Notification of Permanent Disablement from the Social Security.
- A medical certificate of Consolidation.

♦ For MEDICAL EXPENSES
Medical expenses in the event of hospitalisation abroad outside the country of domicile
In the event of Accident or Illness requiring Hospitalisation in situ, the holder of a GROUPAMA ASSISTANCE identification card delivered by the Insurer presents this card to the admissions service of the hospital. The admissions service confirms the validity of the card with GROUPAMA ASSISTANCE the details of which are on the card (by telephone or facsimile).

Payment of costs is made directly at the hospital by GROUPAMA ASSISTANCE without the Insured having to make advance payment.
The Policyholder’s Company, the Insured or his/her Assigns undertake to carry out all steps required to obtain the reimbursement of these costs or other welfare agencies to which the Insured is affiliated and to immediately reimburse GROUPAMA ASSISTANCE any sum received by him/her in this respect.

Important: This cover attaches following acceptance by GROUPAMA ASSISTANCE, and up to the limit given in the Special Conditions.

Medical expenses excluding hospitalisation abroad and the country of domicile
The reimbursement of medical expenses excluding hospitalisation is carried out on the return of the Insured to his/her country of origin. He/she shall provide the supporting documents required on the return of the Insured to his/her country of origin.
The Policyholder’s Company, the Insured or his/her Assigns shall undertake to carry out all steps necessary to obtain the reimbursement of these costs (in whole or in part) from the Social Security or other welfare to which the Insured is affiliated.
The Insurer shall take responsibility for the additional expenses reimbursed by the Social Security and/or other welfare agencies to which the Insured or his/her Assigns are affiliated.

Payment of this additional cost shall take place up to the amount given in the Special Conditions.

Medical expenses in metropolitan France
The reimbursement of medical expenses in metropolitan France is made on presentation by the Policyholder or the Insured of the medical certificate, health insurance voucher, hospital bills and those of doctors’ fees, Social Security statements and/or those of complementary health care providers as well as reimbursement statements of which the Insured was beneficiary.
 FOR INCIDENTS OCCURRING DURING TRAVEL
For reimbursement to be made, the Insured shall necessarily provide the Insurer with the originals of all supporting documents of expenses caused by the said incidents.

 FOR LOCAL SERVICES AND ASSISTANCE TO PERSONS
For the assistance services to apply, the Insured shall necessarily and prior to any intervention involving the assistance covers, contact GROUPAMA ASSISTANCE, the number of which appears on the personal identification card.

PART 5 – MISCELLANEOUS PROVISIONS

TIME-BAR
In accordance with articles L 114-1 and L 114-2 of the French Insurance Code, any actions deriving from this contract are time-barred, that is to say they can no longer be exercised above and beyond Two Years with effect from the event that gave rise to such action.
However, this time-bar shall only run:
- In the event of reluctance, omission, false or inaccurate declaration on the risk, from the day the Insurer became aware of such facts,
- In the event of a loss, from the day the Beneficiaries became aware of such facts if they can prove that until that time they had no knowledge of them.

The time-bar is increased Ten Years in the event of cover against accidents affecting people when the Beneficiaries are the Assigns of the deceased Insured.

SUBROGATION
In accordance with the provisions of article L.121-12 of the French Insurance Code, GROUPE SPECIAL LINES is subrogated up to the amount of the indemnity it has paid to the rights and actions of the Insured against Third Parties.

CLAIMS – MEDIATION
1. In the event of disagreement or dissatisfaction in the performance of your contract, you may send a letter to:

MUTUAIDE ASSISTANCE
SERVICE QUALITE CLIENTS
8/14 AVENUE DES FRERES LUMIERE
94368 BRY-SUR-MARNE CEDEX

the control authority of Groupe Special Lines, GROUPAMA et Mutuaide Assistance is

For the assistance covers listed below:
- Repatriation and medical transport
- Medical, surgical, pharmaceutical expenses and the cost of hospitalisation incurred abroad during a trip
- Accompanying the Insured who is repatriated/transported
- Return of Spouse and Dependent Children accompanying the Insured in the event of repatriation of the Insured
- Presence with the Insured who is hospitalised
- Extended stay
- Delivery of messages
- Repatriation or transport of corpse in the event of death
- Accompanying deceased maximum two members of the family
- Premature return
- Early return of decision in the event of serious event
- Return to place of mission following repatriation
- Dispatch of a replacement colleague
- Dispatch of a doctor on site
- Dispatch of a doctor in the event of illness or accident of a child remaining at the Insured’s domicile
- Dispatch of medicines
- Advance of bail bond
- Legal assistance (lawyer’s fees)
- Forwarding professional documents
- Assistance with passport or identity papers
- Loss or theft of means of payment
- Active listening and psychological support
- Advice in daily life
- Custody of children of less than 16 years of age
- Recovery of Insured’s vehicle
- Support for the family in the event of Accidental Death of the Insured during a trip
- Information service on useful services for the management of handicap and assistance in readapting to everyday life
- Repatriation political unrest
- Repatriation in the event of nature or epidemic
- The cost of Search and Rescue
- Psychological assistance

If the reply you obtain does not satisfy you, you may address a letter to:

GROUPAMA Rhône-Alpes-Auvergne
SERVICE CONSOMMATEURS
TSA 70019
69252 LYON CEDEX 09

GROUPAMA undertakes to acknowledge receipt of your letter within a period of 10 working days. It shall be handled within a maximum of 2 months.
Finally, if there is still disagreement, you may resort to Insurance Mediation, the details of which appear on the reply to your claim on our web page.

2. In the event of disagreement or dissatisfaction with the implementation of your contract, we ask you to make this known to Groupe Special Lines by writing to reclamations@groupepeciallines.fr for the insurance covers listed below:
- Personal accident
- Loss, damage, theft or destruction of personal Luggage, professional equipment
- Loss or theft of identity papers or keys
- Loss or theft of bank cards
- Fraudulent use of the SIM card
- Personal effects and theft of cash following attack
- Delay of aeroplane, cancellation of the flight or non-admission on board
- Delay in delivery of luggage
- Missed connection
- Cancellation of journey
- High-jacking of plane
- Overbooking on regular airlines
- « Private Life » liability

If the reply you receive does not satisfy you, you may send a letter to:

GROUPAMA Rhône-Alpes-Auvergne
SERVICE CONSOMMATEURS
TSA 70019
69252 LYON CEDEX 09

GROUPAMA undertakes to acknowledge receipt of your letter within a period of 10 working days. It shall be handled within a maximum period of 2 months.
If disagreement continues, you may resort to Insurance Mediation, the details of which appear in the replies to your claim on our web site.

CONTROL AUTHORITY
In accordance with the French Insurance Code, (Article L. 112-4) it is stipulated that

In the event of difficulty, the Policyholder shall consult the broker through whom the contract was taken out.
If the reply does not satisfy the Policyholder, the complaint may be sent to "Complaints" department of Groupe Special Lines:
By letter:
  Groupe Special Lines
  Service Réclamations
  6-8 rue Jean Jaurès
  92800 PUTEAUX
By mail: reclamations@groupespeciallines.fr

If the reply to the complaint continues to be unsatisfactory, the Policyholder may contact the « Complaints » Department of GROUPAMA Rhône-Alpes Auvergne:
By letter:
  GROUPAMA Rhône-Alpes Auvergne
  Service Consommateurs
  TSA 70019 – 69252 LYON CEDEX 09
By mail: Service-consommateurs@GROUPAMA-ra.com

Lastly, if there is still disagreement regarding the position or the solution proposed, the Policyholder may bring the matter before Insurance Mediation:
By letter:
  Médiation de l’Assurance
  TSA 50110
  75441 PARIS CEDEX 09
By using the web site www.mediation-assurance.org

DATA PROTECTION
As part of the control regarding the quality of services provided, the telephone conversations between the beneficiaries and the services of GROUPAMA and Mutuaide Assistance may be registered for evidentiary purposes. In accordance with the law n° 78-17 of 6 January 1978 modified relating to computer technology, data and individual freedom, the beneficiary is informed that the individual-related data collected during his/her call are vital to the implementation of the services defined in these general conditions. Failure to reply shall lead to forfeiture of the cover provided by the agreement. This information is intended for the internal use of GROUPAMA and Mutuaide Assistance as well as for the persons involved and in charge of the service, management and performance of the contract within the limit of their respective attributions.
GROUPAMA and Mutuaide Assistance undertake to take every precaution to preserve the confidentiality and safety of personal data (and generally all data) and in particular to prevent it being deformed, damaged or given to non-authorised third parties and more generally to implement the appropriate technical and organisational measures to protect data of a personal nature against accidental or illegal destruction, accidental loss, alteration, distribution or non-authorised access particularly when processing involves the transmission of data into a network as well as against any form of illegal processing. They undertake to take the same precautions with their sub-contractors.
# DISABILITY SCALE

## TOTAL PERMANENT DISABILITY

<table>
<thead>
<tr>
<th>Condition</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total, incurable insanity resulting directly and solely from an accident</td>
<td>100%</td>
</tr>
<tr>
<td>Total loss of sight in both eyes</td>
<td>100%</td>
</tr>
<tr>
<td>Total paralysis resulting directly and solely from an accident</td>
<td>100%</td>
</tr>
<tr>
<td>Total loss of the use of the limbs</td>
<td>100%</td>
</tr>
</tbody>
</table>

## PARTIAL PERMANENT DISABILITY

### SKULL AND SPINE

<table>
<thead>
<tr>
<th>Condition</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total loss of sight in one eye</td>
<td>40%</td>
</tr>
<tr>
<td>Total, incurable deafness resulting solely and indirectly from an accident</td>
<td>45%</td>
</tr>
<tr>
<td>Total, incurable deafness in one ear</td>
<td>30%</td>
</tr>
<tr>
<td>Fracture of the odontoid apophysis of the axis with slipping; maximum depending on rigidity</td>
<td>30%</td>
</tr>
<tr>
<td>Pronounced fracture or dislocation of the spinal column with significant spinal rigidity, signs of radiculomedullary irritation; clinically pronounced curvature of traumatic origin</td>
<td>25%</td>
</tr>
<tr>
<td>Loss of teeth without possibility of prosthesis (per tooth)</td>
<td></td>
</tr>
<tr>
<td>- Incisors - canines</td>
<td>0.60%</td>
</tr>
<tr>
<td>- Premolars</td>
<td>0.80%</td>
</tr>
<tr>
<td>- Molars</td>
<td>1%</td>
</tr>
<tr>
<td>Cranial traumatisms accompanied by loss of consciousness with post-concussion phenomena without objective neurological symptoms: maximum</td>
<td>5%</td>
</tr>
</tbody>
</table>

### UPPER LIMBS

<table>
<thead>
<tr>
<th>Condition</th>
<th>Percentage</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Amputation or total paralysis of the upper limb</td>
<td>65%</td>
<td>55%</td>
</tr>
<tr>
<td>Amputation of the forearm at the elbow joint</td>
<td>55%</td>
<td>45%</td>
</tr>
<tr>
<td>Total loss of the hand or of use of the hand</td>
<td>60%</td>
<td>50%</td>
</tr>
<tr>
<td>Unconsolidated fracture of the humerus (dangling arm)</td>
<td>30%</td>
<td>25%</td>
</tr>
<tr>
<td>Unconsolidated fracture of the forearm (loose pseudoarthrosis of both bones)</td>
<td>25%</td>
<td>20%</td>
</tr>
<tr>
<td>Total loss of both movements</td>
<td>40%</td>
<td>30%</td>
</tr>
<tr>
<td>- of the shoulder</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- of the elbow</td>
<td>20° to 25°</td>
<td>15° to 20°</td>
</tr>
<tr>
<td>- of the wrist</td>
<td>15° to 25°</td>
<td>10° to 20°</td>
</tr>
<tr>
<td>Total loss of the thumb</td>
<td>22%</td>
<td>18%</td>
</tr>
<tr>
<td>Total loss of the forefinger</td>
<td>15%</td>
<td>10%</td>
</tr>
<tr>
<td>Total loss of the middle finger</td>
<td>12%</td>
<td>10%</td>
</tr>
<tr>
<td>Total loss of two fingers other than the thumb and forefinger</td>
<td>15%</td>
<td>10%</td>
</tr>
</tbody>
</table>

### LOWER LIMBS

<table>
<thead>
<tr>
<th>Condition</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Amputation of the thigh at the hip or total paralysis of the lower limb</td>
<td>60%</td>
</tr>
<tr>
<td>Amputation of the leg at the knee joint</td>
<td>50%</td>
</tr>
<tr>
<td>Total amputation of a foot, tibiotaral dislocation (Syne)</td>
<td>45%</td>
</tr>
<tr>
<td>Unconsolidated fracture of the thigh – pseudoarthrosis of the femur: maximum</td>
<td>45%</td>
</tr>
<tr>
<td>Unconsolidated fracture of the leg – pseudoarthrosis of both bones: maximum</td>
<td>35%</td>
</tr>
<tr>
<td>Unconsolidated fracture of the fibula alone (pseudoarthrosis)</td>
<td>2%</td>
</tr>
<tr>
<td>Total loss of movements:</td>
<td></td>
</tr>
<tr>
<td>- of the hip</td>
<td>30° to 40°</td>
</tr>
<tr>
<td>- of the knee</td>
<td>20° to 30°</td>
</tr>
<tr>
<td>- of the instep</td>
<td>10° to 15°</td>
</tr>
<tr>
<td>Amputation of the big toe</td>
<td>10%</td>
</tr>
<tr>
<td>Amputation of another toe</td>
<td>3%</td>
</tr>
</tbody>
</table>

*Favourable position ** Very favourable position

If it is medically recognised that the Insured Party is left-handed, the rates specified for the various disabilities of the right upper limb will apply to the left one and vice versa.