Creand©
Assegurances Vida

ANNEX TO THE GROUP INSURANCE POLICY FOR DEATH DUE TO ANY CAUSE AND REIMBURSEMENT OF COSTS OF EMERGENCY MEDICAL CARE IN THE EVENT OF AN ACCIDENT WHILE DOING ADVENTURE ACTIVITIES. BIKE MODALITY

I. OBJECT OF INSURANCE

The Insurer guarantees the Insured party provision of the benefits covered by this Policy, for death due to any cause and for injuries suffered by them due to an accident occurring while doing adventure activities organised by the Policyholder as an amateur (bike modality), provided that said sport is performed by the Insured Party on the premises of the Policyholder, is duly authorised by the respective ski pass issued by the resort and is undertaken using the safety equipment recommended by the resort.

Doing the aforementioned sports on a professional level and doing them on closed-off slopes or areas of the authorised resort, as well as doing them outside the resort's public opening hours, are excluded from this policy.

In any case, the obligations of the Insurer arising from the scope of this proposal will terminate at the time when, after the covered claim event has occurred, the Insured Party has returned to their habitual residence or when they have been admitted to a healthcare facility in their country of residence.

DEFINITION

Accident: any unexpected action – within the scope of the first paragraph of this section – arising from an external event beyond the control of the Insured Party, which causes them injuries. Accidents that produce only material damage, of whatever kind, are therefore not covered.

II. RISKS COVERED:

Pursuant to the object of this Insurance (section I), the following are considered risks covered by this insurance contract:

a) Death due to any cause during the period covered by the insurance:

- One-day insurance: 24-hour insurance from 12 o'clock midnight on the day corresponding to the insured bike pass.
- Season insurance: from the first day the resort opens to the closing day of the season.

In the event of death due to an accident covered by the policy, this will apply even after the period covered, up to a maximum of 3 months after the accident.

b) Emergency medical care:

This emergency care may consist of the following benefits:

- Care from emergency medical teams and specialists.
- Complementary medical examinations.
- Hospitalisations, treatments and emergency surgeries.
- Supply of inpatient medicines or reimbursement of their cost when they are prescribed by doctors for injuries that do not require hospitalisation.
- Care for acute dental problems resulting exclusively from trauma that requires emergency treatments, up to a maximum of 65 euros.

- Orthopaedic costs, up to a maximum of 40 euros.
- Overland transport costs of the Insured Party from the scene of the accident to Nostra Senyora de Meritxell hospital. If transport is done by helicopter, the company will only reimburse the cost of equivalent transport by ground ambulance.

Medical and body repatriation are excluded.

In the event of death by any cause the Insurer will compensate the legal heirs of the Insured Party with **600 euros**.

The Insurer agrees to reimburse the costs corresponding to the benefits established in this section, **if these benefits are provided in the Principality of Andorra within the 48 hours immediately subsequent to the occurrence of the accident and up to a maximum of 3,000 euros, per Insured Party and per claim event.**

In any case, the obligations of the Insurer arising from the scope of this proposal will terminate at the time when, after the covered claim event has occurred, the Insured Party has returned to their habitual residence or when they have been admitted to a healthcare facility in their country of residence.

All insured ski passes must be in the bearer's name. No refund will be awarded unless accompanied by the original ski pass bearing the name of the injured Insured Party and this name matches the name of the holder of the invoice to be reimbursed.

III. POLICY EXCLUSIONS

The following risks are excluded from this insurance contract:

a) Events caused voluntarily by the Insured Party or those involving the wilful intent or recklessness thereof.

b) Benefits originating from pre-existing injuries or pathologies, and consequences or sequelae suffered by the Insured previously or that are unrelated to the adventure activity accident.

c) Death due to suicide, injuries or conditions arising from attempted suicide, those intentionally caused by the Insured Party themselves, and those arising from the Insured Party's criminal enterprise.

d) Injuries or pathological conditions resulting from the ingestion of alcohol, psychotropic drugs, hallucinogens or any drug, narcotic product or substance with similar characteristics, or from the ingestion of non-prescribed medication.

e) Beauty treatments and the supply or replacement of hearing aids, contact lenses, glasses, general orthoses and prostheses, as well as expenses incurred for childbirth, pregnancy or any type of mental illness.

f) Injuries arising from the Insured Party's involvement in official competitions.

g) Rescues and helicopter transport.

h) Medical and body repatriation.

i) Any non-emergency outpatient medical procedure following emergency medical care.

j) Treatments and surgeries not considered to be a vital emergency.

Creand©
Assegurances Vida

ANNEX I TO THE COLLECTIVE LIFE INSURANCE POLICY WITH COMPLEMENTS OF MEDICAL ASSISTANCE IN CASE OF ACCIDENTS WHILE DOING ADVENTURE ACTIVITIES

PRIVATE LIABILITY INSURANCE

This coverage is insured by Financera d' Assegurances, S.A. Insurance company domiciled at Babot Camp 1 street, d'Andorra la Vella.The insurer takes charge, up to the maximum limit of **18.000 euros** per season for SEASON PASS, and **7.500 euros** per season of DAILY PASS, of pecuniary compensations that may be required from the Policyholder for bearing civil liability for personal injuries and/or property damage, as a result of simple negligence to third-party persons, animals or objects, during skiing within the slopes of the Ski Station.

It is stated that the maximum amount fulfilled by the Insurer for this concept, with independence of the number of claims from the injured persons, will be 18.000 euros per season in the case of SEASON PASS and Policyholder, and will be 7.500 euros in the case of DAILY PASS per season and Policyholder.

Within this limit, the following are expressly included: judicial bonds required to the Policyholder, as well as legal taxes and costs, including Lawyer and Solicitor's fees.

Nevertheless, an excess of 150 Euros per accident will be applied to all the compensations that the Policyholder must fulfil for this concept.

In any case the present insurance will cover the amounts that the Policyholder may be forced to pay to third parties as a result of fines or penalties issued by Courts or Authorities of all kinds.

Likewise, the following are excluded from the insurance's coverage: damages caused by the Policyholder to the staff working in that moment in the Ski Station, as well as damages caused to animals or objects owned by such staff or the very own Ski Station.

Finally, it is stated that, in the event of a compensation claim to the Policyholder due to presumed imprudent actions by the Policyholder –in the terms established in the present Policy- , causing injuries and/or damages to blood relatives in the direct line, up to the fourth grade in collateral line, being either blood-related or relative, to the spouse, domestic partner or friends and/or travel or skiing companions, the Insurer may condition the payment of any compensation to said third parties, to the irrefutable proof of the causes of the accident by means of elements that do not consist exclusively of the statements of said relatives, friends and/or companions.