ESQUIA 100% TRANQUIL

PRINCIPALS COBERTURES DE LA PÒLISSA

- Defunció per qualsevol causa
- Assistència al centre mèdic de pistes a càrrec directe de l'assegurador
- Reemborsament de despeses mèdiques fins a 3.000 €
- Repatriació o transport sanitari
- Rescat a pistes

100% SAFE SKIING

MAIN POLICY COVER

- Death for any reason
- Assistance at your ski resort’s medical centre charged directly to the insurer
- Reimbursement of medical expenses up to €3,000
- Repatriation and medical evacuation cover
- Piste rescue
ASSEGURANÇA DE DIA O DE TEMPORADA

En cas de sinistre és obligatori adreçar-se al centre mèdic de l’estació i aportar el forfait assegurat. Si necessites més assistència, truca al telèfon que s’indica a continuació per demanar autorització: 0034 93 485 89 36. Qualsevol prestació no autoritzada per la companyia no serà reemborsada.

Aquesta és una assegurança de primera assistència. Les garanties de l’assegurança cessen quan la persona assegurada arriba al seu domicili o a un establiment sanitari del seu país de residència.

Important
En cas de reclamació de despeses, necessitaràs:
- Còpia del forfait.
- Còpia de l’informe mèdic.
- Còpia de les factures.
- Una fotocòpia del DNI o del passaport d’un tutor legal (si l’assegurat és menor d’edat).

Caldrà que ho enviis per e-mail a prestacions@creditassegurances.ad, o per correu postal a Crédit Assegurances a:

o que ho lliuris a qualsevol oficina de Crèdit Andorrà. Els reemborsaments es faran mitjançant transferència bancària o xec emès per Crèdit Andorrà.

DAILY OR SEASONAL INSURANCE

If you have a skiing accident, you must go to the medical centre at your ski resort and show your insured ski pass. If you require further assistance, please call the following telephone number for authorization: 0034 93 485 89 36.

Any service not authorized by the insurer will not be reimbursed.

This is a medical emergency insurance policy. The insurance cover expires when the insured person arrives home or at a healthcare centre in his/ her country of residence.

Important
If you are making an expenses claim you will need:
- A copy of your ski pass.
- A copy of your medical report.
- A copy of the bills.
- A photocopy of the ID card or passport of a legal guardian (if the insured person is a minor).

Please send to Crédit Assegurances at prestacions@creditassegurances.ad, by post to Crédit Assegurances to:

CRÈDIT ASSEGURANCES, SAU
Av. Fiter i Rossell, 22. AD700
Escales-Engordany. Principat d’Andorra
www.creditassegurances.ad · 0034 93 485 89 36

or else hand in at any branch of Crèdit Andorrà. Reimbursements will be made by bank transfer or a cheque issued by Crèdit Andorrà.
ANNEX I TO THE COLLECTIVE LIFE INSURANCE POLICY WITH COMPLEMENTS OF MEDICAL ASSISTANCE IN CASE OF ACCIDENTS ON SKI TRACKS

DAY AND SEASON SKI PASS 2018-2019

OBJECT OF THE INSURANCE POLICY

The Insurer guarantees the Insured to provide the main death coverage for any cause and the complementary guarantees safeguarded in the present policy, on grounds of injuries suffered by the Policyholder as a consequence of an accident occurred during the practice, as an amateur, Of on-slope alpine skiing; cross-country skiing in usual, known and signalled circuits; artistic skiing; ski jumping; monoskiing; snowboarding; mountain skiing; freeride and freestyle.

As well as the following adventure activities promoted and controlled by the station, Archery; snowshoes excursions; igloo construction; snow tubing; groomer rider/snow; Ratrack machine; paintball; snowmobile excursions; mushing; zip line; sleds; “collective raid” circuit (multi-activity consisting of part of the aforementioned activities, orientation activities and ARVA); provided the practice of such sports by the Insured takes place within the facilities of the Policyholder Ski Station and is adequately allowed by the corresponding forfeit issued by said Ski Station.

The insurer takes charge, 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. This cover is assured by the insurance company Financera d’Assegurances SA.

From the present policy, the following are excluded: professional practice of said sports, and their practice in closed slopes or areas of the authorised ski station, as well as their practice outside the ski station’s opening hours. The station’s opening can be partial; that is, the accidents in the slopes open outside regular opening times (illuminated nocturnal slopes) or activities directed by the ski station and its staff outside regular opening times (“first snow”) are covered.

In any case, the obligations of the Insurer derived from the coverage of the present Policy will cease in the moment in which, once produced the covered accident, the Policyholder has returned to their habitual residence or has been admitted in a health facility located in their country of residence.
DAILY AND SEASON PASS

COVERED RISKS

PARTICULAR CONDITIONS

MAIN COVERAGE

DEATH FROM ANY CAUSE

In the event of death of the insured from 00:00 hours until 24:00 hours of the day to which the insured payment corresponds the ski pass, the Insurer will pay its beneficiaries a capital of 600 Euros.

ADDITIONAL COVERS

1. – MEDICAL, SURGICAL, PHARMACEUTICAL, AND HOSPITALISATIONS EXPENSES

In case the Policyholder suffers an accident during skiing in the terms stated in section V of the General Conditions of the Policy, the Insurer will take charge of the expenses corresponding to the intervention of professionals and health centres required for tending to the injured Policyholder. The following services are specifically included:

1. Assistance by emergency medical teams and specialists.
2. Complementary medical examinations.
3. Hospitalizations, treatments, and surgical interventions.
4. Medicine supply in hospital or refund in case of injuries that do not need hospitalisation, prescribed by the treating physician. An excess of 9 Euro is established for pharmaceutical expenses.
5. Assistance for acute dental problems caused exclusively by traumas that require urgent treatments, up to a maximum of 30 Euro.
6. Any type of medical expense inferior to the amount of 9 Euro will be excluded from payment.
7. Payment of crutches, up to a maximum of 30 Euro.

The Insurer will take charge of the expenses corresponding to the services set forth in this section, provided these services take place in the Principality of Andorra and up to a maximum of 3,000 Euro per Policyholder and accident.

In any case, the obligations of the Insurer derived from the coverage of the present Policy will cease in the moment in which, once produced the covered accident, the Policyholder has returned to their habitual residence or has been admitted in a health facility located in their country of residence.

In the case of residents in the Principality, the first urgent medical assistance, and once the Policyholder becomes stabilised, the policy coverage will cease.
2. – SLED, AMBULANCE OR HELICOPTER RESCUE EXPENSES

The Insurer will take charge of the expenses incurred by the Policyholder on the occasion of their rescue by sled, ambulance, or another means of transport used for their rescue.

It is explicitly stated that the following are covered:

- Assistance by emergency medical teams and specialists.
- In the supposed case, that at the moment of the accident, there was no other means of transport available in the Ski Station different than the helicopter; the Insurer will also take charge.

3. – REPATRIATION OR SANITARY TRANSPORTATION OF INJURED.

In case of an accident covered by the insurance, the Insurer will take charge:

1. Of the expenses for ambulance transportation to the clinic or hospital closer to the location where the accident has taken place.

2. Of the monitoring by their Medical Team, in contact with the physician that assists the injured Policyholder, in order to determine the most adequate measures for the best treatment to follow and the most adequate means of transport for their eventual transfer to another hospital which is more appropriate or to their habitual residence.

3. Of the expenses for injured transportation to the prescribed hospital or to their habitual residence. If the Policyholder was admitted in a hospital not close to their residence, the Insurer will take charge, when the time comes, of the subsequent transfer to such residence, provided it is located in Europe.

4. When required by the urgency and seriousness of the case, the means of transport to be used in Europe and bordering countries in the Mediterranean will be an especially conditioned sanitary aircraft.

5. In other cases, it will be by a regular airline or by the fastest and most appropriate means, according to the circumstances.

4. – TRAVEL AND ACCOMMODATION OF A RELATIVE IN CASE OF HOSPITALITATION.

When the condition of the injured Policyholder requires their hospitalisation for a time period higher than five (5) days, starting from the date of the accident, the Insurer will take charge of the round-trip tickets for all means of transport necessary for the travel of a relative of the Policyholder, or the person appointed by the Policyholder, provided such person is residing in an European country, for the purpose of accompanying the Policyholder.

The Insurer will take charge of the expenses of accommodation in a hotel, against the submission of the corresponding invoices, up to the maximum daily amount of 30 Euro and for a maximum period of time of ten (10) days.

Living expenses and any other expenses not directly linked to accommodation will be taken charge by the relative or companion.

5. – EXPENSES OF THE POLICYHOLDER’S ACCOMMODATION IN A HOTEL.

When the Policyholder who has been hospitalised cannot immediately return to their residence due to medical prescription, the Insurer will fulfil their expenses of accommodation in a hotel, after their hospitalisation.
The Insurer will take charge of these expenses against the submission of the appropriate receipts, up to the maximum daily amount of 30 Euro and for a maximum period of time of ten (10) days.

6. – REPATRIATION OR TRANSPORTATION OF A CORPSE.

The Insurer will take charge of all formalities to be carried out in the case of decease of the Policyholder, will organise the transfer of the body to the place of interment in their country of origin or residence, provided such country is in Europe, and will assume all expenses. In these expenses, the expenses of post-mortem treatment according to legal requirements are understood as specifically included.

Transfer and repatriation expenses, and the expenses typical of the burial of the body and the ceremony, are not included.

7. EARLY RETURN OF THE POLICYHOLDER DUE TO THE DECEASE OF RELATIVE.

If the Policyholder must interrupt their stay due to the decease of their spouse, ascendants, descendants of first degree or siblings, the Insurer will take charge of the round-trip tickets for all means of transport necessary for the travel to their country of origin, provided such country is in Europe.

8. EARLY RETURN OF THE POLICYHOLDER DUE HOSPITALISATION OF A RELATIVE.

If the Policyholder must interrupt their stay due to the hospitalisation of their spouse, ascendants, descendants of first degree or siblings, as a consequence of a serious accident or illness that requires treatment for a time period of at least five (5) days, and such accident or illness has taken place after the start of the Policyholder’s journey to proceed with skiing, the Insured will take charge of the transportation to the location in which the sick person has their residence, provided it is in Europe.

9. – REFUND OF THE COST OF THE UNUSED SKI PASS.

In the case the purchased pass is valid for more than one day, the Insurer will take charge of the refund to the Policyholder of part of the price paid for the DAILY PASS, proportionally to the days left until the end of its validity, as a consequence of having suffered injuries during skiing that cause the Policyholder not to be able to ski during the days that are still left of validity, up to a maximum amount of 80 Euro.

The Insurer will take charge of the refund to the Policyholder of part of the price paid for the SEASON PASS, proportionally to the days left until the end of ski season, as a consequence of having suffered injuries during skiing that cause the Policyholder not to be able to ski during the days that are still left of the season, up to a maximum amount of 300 Euro.

In order to calculate the days that are left until the end of ski season, it will be understood that such season begins on 1st December and finishes on 30th April of the following year.

The amount for the pass corresponding to the day in which the accident takes place will not be refunded in any case.

10. – REFUND OF THE COST OF UNUSED SKIING LESSONS.

The Insurer will take charge of the refund of the expenses of contracting skiing lessons that cannot be attended because the Policyholder suffered an
accident covered by this insurance, up to a maximum amount of 150 Euro.

The amount for the lessons corresponding to the day in which the accident takes place will not be refunded in any case.

11. – TRANSMISSION OF URGENT MESSAGES

The Insurer will proceed with the transmission of any urgent messages requested by the Policyholder, derived from the events covered by the present guarantees.

12. – EXPENSES OF MOUNTAIN SEARCH INSIDE THE SKI STATION PREMISES.

The Insurer will take charge of the expenses derived from mountain search of the Policyholder, inside the Ski Station premises, up to a maximum amount of 9,000 Euro.

13. – SENDING OF PROFESSIONAL DRIVER.

In the case that while skiing the Policyholder suffers an accident that causes their death or injuries that imply their admission in a hospital, the Insurer will send a professional driver in order to transport the Policyholder’s vehicle and its occupants to the place of residence or destination, in Europe, and at the Policyholder’s choice, if any other of the occupants cannot substitute the Policyholder in driving the vehicle.

14. INSURANCES SEASON PASS: Compensation Insurance for decease or total and permanent disability of the Policyholder, occurred as a consequence of an accident while skiing.

This coverage is not included in the daily pass.

The Insurer will fulfil, in the event of decease of the Policyholder occurred as a consequence of an accident while skiing, in the terms established in the present Policy, the single and by-the-piece amount of 6,000 Euro.

In the case of the deceased Policyholder being under the age of 14, the Insurer will only fulfil funeral expenses up to a maximum amount of 3,000 Euro.

In the case of total and permanent disability supervened to the Policyholder, due to an accident while skiing, in the terms established in the present Policy, the Insurer will fulfil the single and by-the-piece amount of 12,000 Euro.

Finally, the institution issuing the cheques or bank transfers, in this case CRÈDIT ASSEGURANCES, SAU, will not take charge in any case of the expenses or banking fees generated by banking institutions inside and outside the country, with the exception of the institution CRÈDIT ANDORRA.
ANNEX II TO THE COLLECTIVE LIFE INSURANCE POLICY WITH COMPLEMENTS OF MEDICAL ASSISTANCE IN CASE OF ACCIDENTS ON SKI TRACKS

DAY AND SEASON SKI PASS 2018-2019

PRIVATE LIABILITY INSURANCE

DAILY AND SEASON PASS

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 Euro per season for SEASON PASS, and 6,000 Euro 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 Euro per season in the case of SEASON PASS and Policyholder, and will be 6,000 Euro 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 Euro 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.
REPRINT BY LOSS OF SKI PASS

NEW: In case of loss, the Grandvalira ski pass reprint service is included free of charge.

To proceed with the reprint of the ski pass, it is imperative to go to the ticket office.

It does not apply to the Season Ski Pass.