

Accidental injury insurance

Your Policy Number is:

B3ASE-SFF-01

Who is covered by the insurance:

Insurance coverage is for members of Parachutist Clubs associated to The Swedish Parachutist Association (Svenska Fallskärmsförbundet - SFF), who have a valid license and for passenger at a tandem jump.

When the insurance applies:

The insurance applies worldwide when insured member jumps from approved aeroplane and the insurance cover starts as soon as the jumper has left the aeroplane. The insurance does not cover jumps from stationary objects (buildings, towers, mountains, etc). However the insurance can cover in-door training, if the insured is coached by licensed authorized instructor being member of Parachutist Club associated to SFF.

The term accidental injury

Accidental injury means – with the limitations stated below – bodily injury suffered by the insured involuntarily through sudden external event (accident) during the insurance period. An accident is also considered to be a bodily injury that has arisen through frost-bite, heat-stroke or sunburn. Such bodily injury shall be considered to have occurred on the day such condition is first noticeable.

If bodily disorders (illness, sickly change, disability or harm) existed when the accident occurred, or if this condition set in later in connection with the accidental injury and it can be assumed that the bodily harm lead to an aggravation of the consequences of the damage, compensation will only be granted for the consequences, regardless of the bodily harm and solely a result of the accidental injury.

As accidental injury is not regarded here

- Injury that has arisen due to infection from bacteria, a virus or other infectious substance,
- Injury that has arisen due to the use of medical preparation, surgery, treatment or examination not resulting from the accidental injury as covered by this insurance.
- Injury where it may be assumed that the injury causing event was caused due to the injured being mentally ill or being under the influence of alcohol, other intoxicant, sleeping pills or drugs or due to abuse of pharmaceuticals.
- After the occurrence of the accident, the deterioration of state of health conditions, if this deterioration, according to medical experience, likely

would have occurred even if the accident had not taken place.

- Dental injury as a result of chewing or biting.

Special limitations apply for treatment expenses resulting from dental injuries.

Compensation for medical and dental injuries and travel expenses

The right to compensation is applicable for accidental injuries that result in costs for care and treatment by a doctor or dentist and for travel. Compensation will be granted only for costs incurred within 3 years from the date of the accident. In the event the accident occurred outside the domicile country of the insured, home transportation shall occur, after medical judgement, as quickly as reasonably possible.

Claims for compensation for costs must be verified with original documentation. Compensation will not be paid for costs for which the right to compensation exists in accordance with laws, statutes, conventions or other insurance policies.

For insured not being covered by a Nordic social insurance offices, the insurance is not applicable in the domicile country of the insured and is applicable only for emergency care in the country where the accident occurred. Compensation will be paid for necessary and reasonable costs for home transportation and emergency care until the day when home transportation, in accordance with medical judgement, can reasonably be carried out, however not more than 90 days from the date the accident occurred.

Compensation will be granted for the following expenses in the event of an accident:

- Medical expenses
- Treatment costs for dental injuries
- Travel expenses
- Travel expenses for relatives in the event of severe injuries or death
- Damaged property
- Compensation for crisis treatment at severe accidents.

No compensation will be paid for any of these costs if the right to corresponding compensation is granted in accordance with laws, statutes or any other insurance policy.

Disability compensation

a) Working capacity disability

Working capacity disability refers to for the future permanent reduction of the insured's capacity of getting income at grown-up age by at least 50 % as a result of the accident. The disability degree corresponds to the degree of sickness benefit. Consideration should only be given the reduction of such working capacity which the injured would have used if the working capacity would not have been lost. In order to classify the degree of working capacity disability, only such injuries and symptoms being seen objectively will be considered. The working capacity will be considered to be permanent reduced when every possibility to work in any other occupation has been tried

out and the social insurance office has granted sickness benefit according to the law of national insurance.

Before the working capacity disability arises the accidental injury must furthermore have led to a measurable medical disability of at least 5 %.

If the insured by the time of injury was entitled to full sickness benefit or activity benefit, no compensation for working capacity disability is paid.

If the insured by the time of injury was entitled to partial sickness benefit or activity benefit, compensation is only paid for a maximum of working capacity disability corresponding the loss of remaining working capacity.

b) Medical disability

Medical disability means a permanent reduction of the insured's bodily functions due to an accidental injury.

Permanent pain, loss of sensory function or inner organs, is also regarded as medical disability. For disfiguring scars the right of compensation will be calculated according to a table established by Inter Partner Assistance Direktion für Deutschland, a member of AXA Group.

The degree of disability is settled according to the injuries and symptoms caused by the accident and which can be established objectively. The settlement is done despite of to which extend the working capacity of the insured has been reduced by the accidental injury. If a part of the body that has been lost can be replaced by prosthesis, the degree of disability will be assessed taking the prosthesis function into account.

Medical disability is assessed in accordance with the table used by the insurance business. If as a result of the same accident injury occurred to several parts of the body compensation will not exceed a maximum calculated on a basis of 100 % disability.

c) The amount of disability lump sum

The disability lump sum is to its amount calculated in proportion to the insurance amount for disability stated in the insurance agreement or insurance policy and is calculated according to the degree of medical disability. Still the compensation should be decided according to the working capacity disability if that would lead to a higher disability lump sum. Compensation can never be paid for both medical and working capacity disability.

d) Entitlement to disability compensation

Entitlement to disability compensation arises if the accidental injury within three years from the time of the accident causes disability at a total of at least 5 % and at least 12 months have elapsed since the accident. As soon as the definite degree of disability has been assessed the disability compensation will be paid. Establishment of the definite degree of disability should, if possible, take place within three years from the time of the accident but may be postponed for as long as necessary according to medical expertise or in view of existing rehabilitation facilities. If the treatment is fully completed and the definite degree of disability can be established before 12 months have elapsed since the time of the accident entitlement to compensation will come into force and compensation will be paid when the degree of disability is established. In the event of death of the insured before

the entitlement to disability compensation has come into force no disability compensation will be paid. In the event of death of the insured after the entitlement to disability compensation has come into force, the amount corresponding to the established medical disability arisen before the event of death will be paid.

e) Entitlement to reappraisal

Reappraisal of establishment of the degree of disability may be done if substantial and definitive changes have occurred in the circumstances being the basis of the assessment. However the period of limitation is always 10 years.

Death benefit

Entitlement to death benefit exists if the accidental injury causes the death of the injured person within three years from the time of the accident.

Death benefit will be paid to the estate of the insured person if no other arrangements have been notified to the company in writing.

Scope:

Medical, dental injuries and travel expenses	Necessary and reasonable costs
Relative's travel costs to severely injured or deceased	Necessary and reasonable costs
Compensation for rehabilitation costs	Necessary and reasonable costs, maximum total SEK 50 000
Compensation for crisis treatment at severe accidents	Maximum total SEK 15 000
Compensation for damaged property due to accident	Maximum total SEK 5 000
Accidental injury compensation in the event :	
- of death	SEK 25 000
- of disability <50%	SEK 250 000
- of disability >50%	SEK 500 000

IMPORTANT! Please refer to the insurance terms and conditions in Swedish for complete provisions as well as the scope of insurance coverage.

Conditions:

Complete terms, conditions and claim form can be ordered from Svenska Fallskärmsförbundet (SFF) or Säkra, Box 2263, 550 02 Jönköping Sweden.

Routines of claims notification

Injuries are to be reported as soon as possible to:

SÄKRA Försäkringsmäklare

Box 2263

SE- 550 02 JÖNKÖPING

Phone: +46 (0)36-30 48 30

Fax: +46 (0)36-30 48 59

For immediate assistance in case of emergency:

SOS International

Phone: +46 (0)8-646 33 00

Insurer:

SOLID Försäkrings AB, Box 22209 S-250 24
Helsingborg