

PRODUCT SUMMARY – GROUP PERSONAL ACCIDENT INSURANCE FOR CARE AND LEARNING CENTRE

(I) PRODUCT INFORMATION

Coverage, Schedule of Benefit & Description of Benefits

This is a yearly renewable Group Personal Accident plan for Care and Learning Centres. The policy pays the Insured Person for the benefits as described below.

BENEFITS	SUM INSURED
1. Accidental Death & / or Permanent Disablement (Scale II)	S\$10,000
2. Accidental Medical Expenses (include Licensed Chinese Physicians for injury at sub-limit of up to S\$200)	Up to S\$1,000
3. Medical Expenses due to Infectious Disease **	Up to S\$100
4. Cash Benefits **	Up to S\$300
5. Bereavement Expenses	S\$2,000

** only for the Insured Person who is suffering/infected with the following infectious diseases:-
 (a) Severe Acute Respiratory Syndrome (SARS)
 (b) Dengue Fever
 (c) Avian Influenza or Bird Flu due to influenza A viral strains H5N1, H1N1, H9N2 or H7N7
 (d) Hand Foot & Mouth Disease
 (e) Measles

Accidental Death & Permanent Disablement Benefit

If an Insured Person shall sustain injury which results in Death or Permanent Disablement within 12 months from date of accident.

Accidental Medical Expenses

The actual charges incurred for treatment of an Insured Person for Injury in a Hospital (including all daily room and board expenses, Surgery, Hospital miscellaneous expenses) or by a General Practitioner (including laboratory and x-ray charges) or the Reasonable and Customary Charges, up to the limit of S\$1,000. It is also extended to include treatment by Licensed Chinese Physicians for injury other than fracture up to the sub-limit of S\$200.

Provided the above medical expenses are incurred within 12 months from the happening of the Accident.

Medical Expenses Due to Infectious Disease

The actual charges incurred for treatment of an Insured Person who is suffering / infected by the Infectious Diseases mentioned above.

Cash Benefit

Should the Insured Person sustains a Sickness due to an Infectious Disease resulting in medical leave granted by a Doctor or quarantine, confinement or isolation imposed by an authorized representative of any local authority, We shall pay :

- (i) S\$100 for 7 consecutive days;
- (ii) S\$200 for 14 consecutive days;
- (iii) S\$300 for 30 consecutive days.

Bereavement Expenses

Payable if an insured Person dies from,

- (a) an injury or
- (b) an infectious disease during or after treatment.

Annual Rate (inclusive GST)

S\$10.90 per Student, subject to minimum premium of S\$87.20 per policy. Insured Teachers are charged at no cost.

(II) KEY PRODUCT PROVISIONS

The following are some key provisions found in the policy contract. This is only a brief summary and you are advised to refer to the actual terms and conditions in the policy contract. Please consult your insurance advisor should you require further explanation.

1. Territorial Limit
24 hours, worldwide coverage only for Students. Teachers will be covered within the centre premises and during activities organised by the centre.

2. Eligibility
Person eligible for cover under this Policy are:
(i) Registered Student at Care and Learning Centre, ages between 6 months and 18 years.
(Such as nursery, kindergarten, infant care, before and after school care, tuition and enrichment centre and the like)
(ii) Full-time Employees at the Care and Learning Centre who are Teachers aged 64 years old and below.
They will only be covered in the centre premises and during activities organized by the centre at no cost.

3. Policy Renewal
This Policy is renewable at our option and at the premium rates determined at that time by us. Where at renewal a request is made to hold cover, the maximum period that cover can be held will be 14 days. If at the end of this period, the Policy is cancelled or lapses for any reason whatsoever, a premium based on our short-period rate will be charged for the time on risk.

4. Change of Terms and Conditions
We reserve the right to amend the terms and provisions of this Policy on any Policy Anniversary date by giving the Insured 30 days' written notice of such change.

5. Data Required
If the group size is 20 and below, the Policy shall be administered on a "named" basis. Full particulars showing the Insured Person's (i) full name, (ii) date of birth, (iii) birth certificate number, NRIC number, Passport number, (vi) effective date of cover or date of termination of cover shall be provided in writing within 1 month of such addition / deletion and we shall charge the premium as follows. There is no refund for terminated person.

Period of Cover	Short-Period Premium Charged	Short-Period Premium Refund
6 months & below	60% of Annual Premium	No refund
Above 6 months	Full Annual Premium	No refund

If the group size is 21 and above, the Policy shall be administered on a "headcount (unnamed)" basis with a list of all Insured Persons lodged with us at inception. New Insured Persons will be automatically covered. Headcount adjustments, based on average, will be done at the end of each policy period. Any adjustment in headcount increase, will be billed at the end of each policy period. There is no refund for headcount reduction.

6. Cancellation of Cover
The Company may cancel this Policy by giving fourteen (14) days' notice by registered letter to the Insured's last known address and in such event the Company will return to the Insured the premium paid less the actual premium payable for the period during which the policy had been in force subject to a minimum premium of S\$54.50 (inclusive of GST) by the Insured.

This Policy may be cancelled at any time by the Insured by giving seven (7) days' written notice to the Company and provided no claim has arisen during the period which the Policy had been in force the Insured shall be entitled to a return of premium subject to a minimum premium payment of S\$54.50 (inclusive of GST) by the Insured and subject to any adjustment of premium required by the Terms of this Policy.

7. Other Insurances and Third Party Liability
If at the time of claim the Insured Person shall hold other medical insurance which makes provision for payment of medical expenses, Insured Person should advise us of the details of such other insurance and we shall be liable only for the balance of the amount recoverable from such other insurance.

In the event of any claim or right of action against third party arising from a claim paid under this Policy, You must notify Us in writing immediately of all developments and take all steps that we may reasonably require to include all benefits claimed for under this policy in any claims against the third party with the objective of recovering the claim paid.

8. Limit Per Conveyance
The total liability payable whilst a number of insured persons are together shall not exceed the limit of S\$3,500,000.00 per event and/or conveyance.
In the event the maximum liability should exceed S\$3,500,000.00 per event and/or conveyance, the limit amount will be apportioned among the insured persons, but the sum will not be greater than the maximum sum insured of each Insured Person.

9. Some Free Extensions

- (i) Food Poisoning
- (ii) Treatment by Licensed Chinese Physicians
- (iii) Insect / Animal Bite
- (iv) Suffocation by Smoke, Gas, Poison Fumes & Drowning Food Poisoning

10. Some Exclusions

- (i) Self-inflicted injuries or any attempt thereof while sane or insane.
- (ii) War, Invasion, act of foreign enemy hostilities or warlike operations.
- (iii) Participation in any sports in a professional capacity, dangerous activities or sports.

Policy Owner's Protection Scheme

This policy is protected under the Policy Owner's Protection Scheme which is administered by the Singapore Deposit Insurance Corporation (SDIC). Coverage for your policy is automatic and no further action is required from you. For more information on the types of benefits that are covered under the scheme as well as the limits of coverage, where applicable, Please contact the Company or visit the GIA / LIA or SDIC websites (www.gia.org.sg or www.lia.org.sg or www.sdic.org.sg).

IMPORTANT NOTE

This is only a product summary which provides only a brief description of the Policy and is not a contract of insurance. You are advised to read the policy contract for full details of the benefits, exclusions and other terms and conditions.

SCALE OF PERMANENT DISABLEMENT BENEFITS

TABLE OF BENEFIT

Description Of Permanent Disablement		Percentages Of The Sum Insured Specified In The Schedule of Benefits
		Continental (Scale II)
1.	Total and Permanent Disablement from engaging in or attending to gainful employment of any and every kind.	100%
2.	Total and Permanent Loss of all sight in both eyes.	100%
3.	Total Loss by physical severance or total and permanent loss of use of	
	(a) hand at wrist	100%
	(b) arm at shoulder	100%
	(c) arm between shoulder and elbow	100%
	(d) arm at or below elbow	100%
	(e) leg at hip	100%
	(f) leg between knee and hip	100%
	(g) leg at or below knee	100%
4.	Total and Permanent Loss of sight in one eye except perception of light	50%
5.	Total loss by physical severance or total and permanent loss of use of	
	(a) thumb and 4 fingers of one hand	50%
	(b) 4 fingers of one hand	40%
	(c) thumb - 2 phalanges	25%
	- 1 phalanx	10%
	(d) index finger - 3 phalanges	15%
	- 2 phalanges	10%
	- 1 phalanx	5%
	(e) middle finger - 3 phalanges	10%
	- 2 phalanges	7%
	- 1 phalanx	3%
	(f) ring finger - 3 phalanges	10%
	- 2 phalanges	7%
	- 1 phalanx	3%
	(g) little finger - 3 phalanges	10%
	- 2 phalanges	7%
	- 1 phalanx	3%
	(h) all toes of one foot	18%
	(i) great toe - 2 phalanges	6%
	- 1 phalanx	3%
	(j) any other toe	3%
6.	Total and Permanent Loss of	
	(a) hearing in both ear	75%
	(b) hearing in one ear	20%
7.	Total and Permanent Loss of speech	50%
8.	Third Degree Burns	
	(a) Head – Damage as a Percentage of Total Body Surface Area	
	(i) equals to or greater than 2% but less than 5%	50%
	(ii) equals to or greater than 5% but less than 8%	75%
	(iii) equals to or greater than 8%	100%
	(b) Body – Damage as a Percentage of Total Body Surface Area	
	(i) equals to or greater than 10% but less than 15%	50%
	(ii) equals to or greater than 15%, but less than 20%	75%
	(iii) equals to or greater than 20%	100%

Where the injury is not specified in the benefit scale above, we will adopt a percentage of disability based on the assessment by our appointed doctor, which in our opinion is consistent with the benefit scale above.