



TERMS AND CONDITIONS OF INSURANCE FOR HOLDERS OF EURO26 CARDS

WORLD SPORT

TAKE THIS BOOKLET WITH YOU - IT MAY BE USEFUL WHEN TRAVELLING

applicable as of 15 October 2011

AXA Towarzystwo Ubezpieczeń i Reasekuracji S.A.
00-867 Warsaw ul. Chłodna 51
Hotline: 801 200 200

AXA Towarzystwo Ubezpieczeń i Reasekuracji S.A., ul. Chłodna 51, 00-867 Warszawa, pursuant to General Agreement No. 11282 concluded with **Polskie Stowarzyszenie Projektów Młodzieżowych** (Polish Youth Projects Association), ul. Długi Targ 11/12, 80-828 Gdańsk insures holders of Polish edition of **EURO 26 WORLD and EURO**

26 SPORT Cards.

Holders of **EURO 26 WORLD** Cards are covered by medical payment insurance with assistance, accident insurance and civil liability insurance in private life when travelling to all countries of the world, excluding the USA and Canada as well as by accident insurance in Poland until the Card's expiry date.

Holders of **EURO 26 SPORT** Cards are covered by medical payment insurance with assistance, accident insurance, and civil liability insurance in private life when practising sports and by rescue costs insurance when travelling to all countries of the world, excluding the USA and Canada as well as by accident insurance in Poland until the Card's expiry date. Holders of **EURO 26 SPORT** are covered by insurance when practising sports listed in Terms and Conditions of Insurance.

It is required to read Terms and Conditions of Insurance for holders of **EURO 26 WORLD** and **SPORT** Cards, constituting an integral part of the General Agreement No. 11282. The instruction provided below is only of auxiliary character.

1. During a stay abroad:

In the case of an event (sudden illness, personal accident or any other event that may result in a civil liability claim), it is required to contact immediately:

The Emergency Centre: INTER PARTNER ASSISTANCE POLSKA S.A.

phone: + 48 (22) 575 90 80, fax: + 48 (22) 575 90 82.

The Emergency Centre is open 7 days a week, 24h a day, information is provided in the Polish language. The Emergency Centre will organize a physician's visit and transport, confirm medical expenses, and provide other assistance to the Insured.

Failure to inform the Emergency Centre about an event that occurred abroad will result in reduction of compensation amount by 40 EUR.

2. After returning to Poland:

In the case of an event (sudden illness, personal accident or any other event that may result in a civil liability claim), the Insured is required to fill out and sign a form for reporting damage (available at www.euro26.pl; www.axa-polska.pl) and send it together with original bills and required documentation (each time indicated in the form for reporting damage) by mail to the address of the company dealing with loss settlement and acting on behalf of AXA TUIR S.A., regardless of the fact whether the Insured contacted the Emergency Centre earlier or did not do it due to objective reasons.

Address for correspondence:

3. Personal accident occurring in Poland

Inter Partner Assistance Polska S.A. ul. Chłodna 51, 00-867 Warsaw, phone: +48 22 575 90 80

- Immediately after the personal accident, it is required to visit a physician and obtain a medical certificate containing a description of bodily injuries and a medical diagnosis
- The Insured shall report damage in writing within 3 months from the date of event and
- keep complete medical documentation and all medical examinations referring to the personal accident;
- download a form for "reporting damage from accident insurance" from www.euro26.pl; www.axa-polska.pl;
- send the completed form for "reporting damage from accident insurance" including a complete medical documentation to the following address after the end of medical treatment and rehabilitation, however, not later than within 36 months from the event date:

Inter Partner Assistance Polska S.A. ul. Chłodna 51, 00-867 Warsaw, phone: +48 22 575 90 80

SPECIAL TERMS AND CONDITIONS OF INSURANCE FOR HOLDERS OF EURO 26 WORLD AND SPORT CARDS

SECTION I

General provisions

§ 1

1. These Special Terms and Conditions of Insurance (hereinafter referred to as SWU) shall apply to the insurance agreement entered into by and between AXA Towarzystwo Ubezpieczeń i Reasekuracji S.A. and Polskie Stowarzyszenie Projektów Młodzieżowych (Polish Youth Projects Association), pursuant to which holders of EURO 26 WORLD and SPORT Cards are covered by insurance protection of AXA Towarzystwo Ubezpieczeń i Reasekuracji S.A.

§ 2

The terms listed below shall have the following meaning in these SWU:

- 1 amateur summer and winter sports - the following sports practised in summer or winter: skiing, snowboarding, surfing, windsurfing, kite surfing as well as any team-building activities (e.g. paintball);
- 2 out-patients department - a public health care institution where medical assistance is provided by physicians and nurses in the form of diagnosis and medical treatment; within the meaning defined herein this term does not apply to care home, hospice, substance abuse outpatient clinic, spa and health resorts, prevention and rehabilitation centres.
- 3 Emergency Centre - an organisational unit organising and providing assistance services specified herein to the Insured as well as dealing with loss settlement on behalf of the Insurance Company;
- 4 malignant disease - an illness involving an uncontrolled proliferation of an organ's tissue; this illness may be chronic or result in sudden and acute symptoms;
- 5 chronic disease - an illness lasting for a long time - usually for months or years, treated continuously or periodically;
- 6 tropical disease - an illness caused by pathogens characteristic for subtropical and equatorial zones;
- 7 expedition - an organised trip aimed at carrying out tasks of sport or scientific character;
- 8 disability - permanent impairment of the Insured organism's functions listed in the Table of disability contained in §14 herein;
- 9 EURO 26 Card - a card confirming the membership of a natural person between 5 and 30 years old in the Polish Youth Projects Association; in case a member files an application for being covered by insurance, a card is issued in a version indicating an insurance variant, as a result of which it constitutes an insurance document;
- 10 medical expenses - costs necessary from the medical point of view and documented which were incurred by the Insured who had to undergo treatment due to sudden illness or personal accident during a trip abroad;
- 11 country of residence - a country other than Poland where the Insured is covered by social insurance on the basis of a work permit or citizenship;
- 12 outpatient treatment - health services provided by lawful health care service providers to persons not requiring continuous treatment 24 hours a day or every day;
- 13 conservative dentistry - treatment of caries and necrosis, endodontic therapy, changing impaired fillings, treatment of gum illnesses (periodontal treatment, tartar removal);
- 14 sudden illness - a morbid condition occurring suddenly and unexpectedly, which puts

life or health of the Insured at risk, requiring immediate medical assistance;

15 consequence of chronic or malignant disease - sudden intensification (increase) of chronic or malignant disease of acute character after crossing the Polish border (hereinafter referred to as "Poland") or a country of residence, requiring immediate medical assistance, as a result of which there was a need for treatment before the end of a trip abroad;

16 personal accident - a sudden event caused by an external factor, as a result of which the Insured sustained a bodily injury, disorder of health or died, regardless of his will;

17 bodily injury - injury of organs or systems of the Insured caused directly by an accident;

18 relative - a spouse, cohabitant, children (also adopted), siblings, parents of the Insured;

19 assisting person - a person travelling with the Insured and indicated by him to accompany him during medical treatment or transport;

20 person summoned for assistance - a relative of the Insured residing in RP or country of residence, indicated by him to come to the place of the event to accompany the Insured during medical treatment in the absence of the assisting person;

21 persons under the Insured care - children or adopted children of the Insured, children or adopted children of the Insured spouse, grandchildren of the Insured;

22 hospitalisation - a stay of the Insured in hospital lasting continuously for 24 hours and aiming at treatment of bodily injuries. As defined herein hospitalisation commences on the day the Insured is admitted to hospital and ends on the day the Insured is discharged from hospital;

23 trip abroad - stay of the Insured outside the borders of Poland and country of residence, which commences the moment of crossing the border of Poland or country of residence by the Insured and ends the moment the Insured returns to Poland or country of residence;

24 Holder of EURO 26 Card - a person between 5 and 30 years old the moment of becoming a member of the Association;

25 extreme sports - sport activities that require extraordinary skills and abilities, courage and facing high level of risk, including in particular air sports (such as sky diving, bungee jumping, hang gliding, gliding, aircraft pilotage) as well as mountain biking, caving, ski jumping, mogul skiing, freestyle skiing, heliskiing;

26 high-risk sports - practising the following sports: horse riding, polo, hunting, scuba diving, rafting or other water sports practised in mountain rivers, mountaineering, indoor and outdoor climbing, martial arts and any other defensive sports;

27 sum insured - an upper limit of the Insurance Company's liability defined for particular types of risks;

28 hospital - an in-patient health care institution operating in accordance with applicable provisions of law, whose aim is to provide medical health care services and treatment as well as surgeries by qualified nurses and physicians 24 hours a day; as defined herein, hospital shall not mean a social care facility, psychiatric hospital, hospice, alcohol, drugs and other substances abuse outpatient clinic, spa, recreation and rehabilitation centres;

29 Insurance Company - AXA Towarzystwo Ubezpieczeń i Reasekuracji S.A. with the registered office in Warsaw;

30 permanent health impairment - permanent bodily injury of the Insured caused by a personal accident covered by insurance, while this bodily injury shall mean permanent defect of structure or function of an organ or limb;

31 Insurer - Polskie Stowarzyszenie Projektów Młodzieżowych (the Polish Youth Projects Association - hereinafter referred to as "Association");

32 Insured - a Holder of EURO 26 Card;

33 stroke - a sudden and, as a result, permanent impairment of brain tissue caused by

haemorrhages, ischaemia or embolism of intracranial artery with material from the circulatory system, resulting in neurological deficits lasting not shorter than 24 hours and confirmed by medical examination. As defined herein, a stroke shall not mean episodes of temporary ischaemia of the central nervous system or an apoplexy not resulting in permanent defect of the system's functions.

Diagnosis of permanent impairment of the central nervous system has to be confirmed by examination of a neurologist and results of computer tomography or magnetic resonance imaging not earlier than 8 weeks after the occurrence of first symptoms;

34 health impairment - permanent physical impairment of the Insured, resulting in defect of the organism, defined in percentage on the basis of Table of impairments specified in §15;

35 loss - amputation or total and permanent loss of organ's functions;

36 insurance agreement - an insurance agreement entered into by and between the Insured and the Insurance Company;

37 Claimant - a person entitled to receive compensation in the event of death of the Insured, designated personally by the Insured; in case no authorised person is specified, compensation shall be paid to family members of the Insured in the following order: spouse, children, parents, other heirs of the Insured, regardless whether they indeed succeed to the Insured;

38 working - undertaking any activities by the Insured in order to earn money, as defined herein working shall also mean non-profit activity, e.g. volunteering, work placement.

39 heart attack - necrosis of a limited area of cardiac muscle occurring for the first time as a result of acute ischaemia, diagnosed on the basis of a chest pain typical for heart attack, recent changes in ECG confirming a recent heart attack and considerable increase in concentration of cardiac enzymes in blood. As defined herein a heart attack shall not mean episodes of chocking chest pain (angina pectoris).

40 practising professional and competitive sports - sports practised regularly and intensively, i.e. participation in trainings, competitions, fitness camps due to membership in sport clubs as well as profiting from this sport activity, participating in trips to places of extreme climate or natural conditions or in expeditions.

Subject and scope of insurance

§ 3

1 The insurance for holders of Cards in **WORLD** variant includes: 1) medical expenses and immediate assistance; 2) consequences of personal accidents; 3) civil liability in private life;

2 The insurance for holders of Cards in **SPORT** variant includes: 1) medical expenses and immediate assistance; 2) consequences of personal accidents;

3) civil liability in private life; 4) civil liability connected with practising sports; 5) rescue costs.

1 WORLD and SPORT insurance variants differ from each other by scope of insurance (additional civil liability insurance connected with practising sports and rescue costs in SPORT version) and a possibility to insure sport activity in SPORT version. In WORLD version sport activities are excluded from insurance (except for amateur sports not specified in the definition of amateur summer and winter sports contained in § 2 (1)). In SPORT version Insured are covered by protection in respect of practising all amateur summer and winter sports, including those not contained in definition in § 2 (1), practising high-risk sports, practising professional and competitive sports as well as practising extreme sports.

2 Insurance protection for Holders of EURO 26 Cards covers Holders who received a EURO 26 Card within the term of an insurance agreement.

3 The insurance variant is indicated on EURO 26 Card.

SECTION II

A. MEDICAL EXPENSES AND IMMEDIATE ASSISTANCE

Subject and scope of insurance

§ 4

The insurance covers the following costs incurred as a result of sudden illness or personal accident that occurred during a trip abroad:

- 1 medical expenses;
- 2 costs of transport of the Insured to Poland;
- 3 costs of transport of the Insured body to Poland;
- 4 costs connected with organising and providing immediate assistance;
- 5 rescue costs (only for EURO 26 SPORT Card) Medical payment

§ 5

1. The insurance covers medical expenses necessary from the medical point of view and documented, which were incurred by the Insured who had to undergo treatment due to sudden illness or personal accident during a trip abroad.
2. The Insurance Company shall cover the following costs if documented to the limit of sum insured for medical expenses and immediate assistance: 1) medical consultations including travel costs of a physician from the nearest health care centre if required due to health condition of the Insured; 2) transport of the Insured from the place of personal accident or sudden illness to the nearest hospital or health care institution by means of transport approved by a physician of the Emergency Centre; 3) transport of the Insured to any other health care centre if the health care centre where the Insured undergoes treatment does not provide medical assistance suited to his health condition in accordance with a written instruction of the physician in charge, after approval of the Emergency Centre; 4) ambulatory examinations and treatments, medicaments (excluding vitamins, health tonics, dietary supplements, ointments and beauty creams) as well as dressings prescribed by a physician in charge and approved by a physician of the Emergency Centre up to the limit of an equivalent of 2,000 EUR;

- 5) hospitalisation, i.e. treatment, therapy and surgeries which could not be postponed until return to Poland due to health condition of the Insured; the Emergency Centre chooses a hospital which suits health condition of the Insured best, organises transport to the hospital by medical transportation service, informs the hospital about terms of payment and keeps contact with the hospital;
 - 6) dentistry treatment in the case of sudden inflammatory conditions to the total limit of an equivalent of 250 EUR for all illnesses requiring immediate medical assistance, occurring within the term of insurance protection;
 - 7) repair or purchase of glasses, dentistry prostheses, and auxiliary materials if their damage was connected with personal accident, while these costs are covered by the Insurance Company up to the amount not exceeding 10% of the sum insured of medical expenses and immediate assistance.
3. Compensation limits defined in point 2 above shall apply to: 1) one Insured and 2) all events occurring together within the whole term of insurance.

Costs of transport of the Insured to Poland

§ 6

1 The insurance shall cover all required and documented costs of medical transport of the Insured to Poland - to a health care centre or place of residence, as a result of sudden illness or personal accident if it is necessary due to health condition of the Insured and if the Insured was transported as per instructions of the physician in charge, approved by the Emergency Centre.

2 The insurance shall also cover all required and documented costs of medical transport of the Insured to Poland after the end of treatment if the Insured cannot continue travelling or return by means of transport that was booked earlier. The type of means of transport shall be each time approved by the Emergency Centre.

Costs of transport of the Insured body

§ 7

1. In case the Insured dies during a trip abroad and this death resulted from a personal accident or sudden illness, the Insurance Company shall cover costs of: 1) transport of the Insured body to a burial place in Poland or costs of burial abroad, 2) purchase of a coffin, or costs of cremation and purchase of an urn.

2. The Insurance Company shall cover costs of purchase of a coffin, or costs of cremation and purchase of an urn through the Emergency Centre as agreed with the Claimants. The liability limit shall be in the case of: 1) purchase of a coffin - an equivalent of 1,250 EUR; 2) cremation - an equivalent of 1,250 EUR, while this amount is an upper limit of purchase of an urn and cremation of a body.

3. The Emergency Centre shall choose the means for transporting the body. Costs connected with organising and providing immediate assistance

§ 8

Within the scope of organizing and providing immediate assistance, the Insurance Company shall guarantee the following services and performance:

1 24 hours duty of the Emergency Centre.

2 Information services The Emergency Centre shall provide the Insured with information on: customs and visa provisions, documents required during entry and stay in a particular country, recommended vaccinations, car rental, accommodation, weather and climatic conditions.

3 Help in the case of theft or loss of documents If credit cards or eurocheques owned by

the Insured are stolen or lost during a trip abroad, the Emergency Centre shall provide assistance to the Insured when blocking a current account, which shall include communicating an appropriate phone number to the bank maintaining the account of the Insured or informing the bank maintaining the account of the Insured about theft or loss of the said documents. The Insurance Company shall not be liable for effectiveness or correctness of the account blocking process carried out by the bank or for any damage resulting therefrom. In the case of theft, loss, or damage of documents that are required for the Insured during a trip abroad, the Emergency Centre shall provide information about any activities that should be taken to obtain replacements.

1 Costs of food and accommodation of an assisting person In case the Insurance Company covers costs of hospitalisation of the Insured and this stay exceeds the initial return date of the Insured to Poland, then the Insurance Company shall additionally cover costs of food and accommodation of an assisting person. These costs shall be covered to the limit of an equivalent of 100 EUR per day for up to 7 days.

2 Costs of travel of person summoned for assistance In case the Insurance Company covers costs of hospitalisation of the Insured for more than 7 days and there is no assisting person of over 18 years old, then the Insurance Company shall additionally cover return costs of travel of a person summoned for assistance, residing in Poland or country of residence to the maximum amount of an equivalent of 1,000 EUR. The Insurance Company shall cover costs of a train or bus ticket or - if the travelling time exceeds 12 hours - an air ticket in economic class. Additionally, the Insurance Company shall cover costs of accommodation and food up to the limit of an equivalent of 100 EUR per day for up to 7 days.

3 Continuation of travelling In case health condition of the Insured after the end of hospitalisation due to sudden illness or personal accident allows for continuation of travelling, the Emergency Centre shall, at the request of the Insured, organise and cover costs of the Insured from the place of hospitalisation to the next stage of trip to continue travel. Costs of transport shall be covered to the equivalent of 500 EUR at maximum.

Rescue costs (only for EURO 26 SPORT Card)

§ 9

The insurance covers required and documented costs incurred for rescue or search activities (rescue costs) carried out by specialized rescue services to save life or health of the Insured who was involved in a personal accident (which does not have to result in permanent bodily injury) during a stay outside the borders of Poland or country of residence or contracted a sudden illness when practising sports. Rescue costs shall include:

- 1) costs of search activities undertaken by specialized rescue services; 2) costs of providing emergency assistance at the place of the event; 3) costs of transport from the place of the accident to the nearest health care centre relevant for the health condition (using specialized means of transport such as sled, helicopter, toboggan, motor boat).

SUM INSURED AND LIMITATIONS OF LIABILITY

Sum insured

§ 10

The sum insured as well as limits and sub-limits of the sum insured for medical expenses and immediate assistance are defined in the Table contained in § 28.

Limitation and exclusion of liability

§ 11

1 The Insured shall immediately contact the Emergency Centre to approve costs of medical treatment, transport to Poland, transport of body, immediate assistance and rescue costs. In case these services are not approved by the Emergency Centre, the compensation due paid by the Insurance Company shall be reduced by an equivalent of 40 EUR. This limitation relating to the need to approve costs of medical treatment by the Emergency Centre shall not apply to situations where the Insured could not objectively contact the Emergency Centre due to his health condition.

2 The Insurance Company shall not be held liable for costs of medical treatment, transport to Poland, transport of body, immediate assistance and rescue costs in respect of the Insured if there were any medical contraindications to go for a trip abroad beforehand.

3. Regardless of general exclusions referred to in § 33, insurance protection shall not cover costs of medical treatment, transport to Poland, transport of body as well as costs of organising and providing immediate assistance and rescue costs in case they were incurred due to: 1) treatment not related to medical assistance, provided as a result of sudden illness or personal accident; 2) treatment, hospitalisation or accommodation in case the Insured refused to return to Poland against a decision taken by a physician of the Emergency Centre; such decision shall be approved and agreed by the physician of the Emergency Centre with a physician in charge; 3) treatment, hospitalisation or accommodation in case a physician of the Emergency Centre claims that the treatment may commence after the Insured returns to Poland; 4) treatment exceeding the scope of medical services required to restore health condition of the Insured so that he could return to Poland; 5) treatment in health resorts, therapy in recreation centres or substance abuse outpatient clinics, stays in spa centres and hotels; 6) psychoanalytical and psychotherapeutic treatment; 7) treatment of illnesses or consequences of personal accidents that occurred before the execution of the insurance agreement; 8) examinations that are unnecessary according to a physician of the Emergency Centre to diagnose or treat the illness, screening tests and medical certificates as well as vaccinations; 9) plastic surgeries or cosmetic treatments, 10) treatment of psychological disorders, depression, congenital defects, venereal diseases and AIDS even if there were not treated earlier; 11) special nutrition for the Insured, massages, baths, inhalations, kinesiotherapy, light therapy (even if it was recommended by a physician) as well as other rehabilitation and physiotherapeutic procedures; 12) abortion; 13) pregnancy; 14) labour that took place 2 months before the planned date; 15) artificial insemination and any other infertility treatment as well as purchase of contraception measures; 16) use of other services than standard ones during hospitalisation, such as use of radio, TV, use of hairdresser's or cosmetic services, etc.; 17) conservative and implant dentistry treatment (except for sudden inflammatory conditions defined in § 5 (2) (6) herein; 18) treatment with the use of medicines not admitted by conventional medicine; 19) consequences of chronic and malignant diseases; 20) working without permits and permissions required under the law of the country where the work is provided.

4. Insurance protection in WORLD Card version shall cover the following risks: 1) practising amateur summer and winter sports (except for amateur sports not specified in the definition of amateur summer and winter sports contained in

§ 2 (1) and all team-building activities; 2) practising high-risk sports; 3) practising professional and competitive sports; 4) practising extreme sports.

5. Insurance protection in SPORT Card version shall cover the following risks:

- 1) practising amateur summer and winter sports, including those specified in the definition of amateur summer and winter sports contained in § 2 (1) and all team-building activities;
- 2) practising high-risk sports; 3) practising professional and competitive sports; 4) practising extreme sports.

B. PERSONAL ACCIDENT INSURANCE

Subject and scope of insurance

§ 12

1 The insurance covers consequences of a personal accident involving bodily injuries of the Insured resulting in disability, health impairment or death during a trip abroad or stay in Poland.

2 The Insurance Company shall pay compensation in the case of: 1) death of the Insured as a result of a personal accident, 2) disability of the Insured as a result of a personal accident, 3) health impairment of the Insured as a result of a personal accident, 4) hospitalisation of the Insured

as a result of a personal accident, 5) refund of costs of purchase or repair of prostheses and auxiliary materials for the Insured.

Types of compensation

§ 13 Compensation due to death of the Insured as a result of personal accident

1 In case the Insured died as a result of a personal accident covered by insurance protection and this death occurred within 180 days from the date of the accident, the Insurance Company shall pay compensation to the Claimant in the amount of the sum insured due to death as a result of personal accident.

2 The compensation due to death as a result of personal accident shall be paid to the Claimant after submitting a death certificate to the Insurance Company, medical certificate stating reasons for the death or a death card, a document confirming identity of the Claimant and any other documents required by the Insurance Company to consider the claim in correct manner and in particular to determine a causal link between death of the Insured and personal accident and its circumstances.

3 In case the Insured received compensation for permanent health impairment or disability and then died due to the same personal accident, compensation due to death shall be paid if it is higher than compensation paid to the Insured due to permanent health impairment or disability, while this compensation shall be reduced by an amount of compensation that was already paid due to permanent health impairment or disability.

§ 14

Compensation due to disability of the Insured as a result of a personal accident

1. In case the Insured becomes disabled as a result of a personal accident covered by insurance protection, the Insurance Company shall pay compensation to the Insured in the amount being a sum insured for disability resulting from a personal accident multiplied by a percentage of disability determined by a physician appointed by the Insurance Company and defined in accordance with the Table of disability specified below. This percentage of disability for particular types of disability resulting from one personal accident is totalled, while its sum cannot exceed 100%.

Table of disability

	Percent Type of disability
Total blindness in both eyes	100%
Total blindness in one eye or enucleation of an eyeball	40%
Total deafness	50%
Deafness in one ear	20%
Loss of speech (includes total loss of tongue as well as motor and sensory aphasia)	40%
Chronic hemiplegia or paraplegia	100%
Monoparesis	40%

Chronic quadriplegia	100%
Chronic paraplegia	90%
Chronic quadriparesis or diparesis	80%
Loss of both legs	100%
Loss of a leg in the hip region	75%
Loss of a leg in the thigh region	70%
Loss of a leg in the knee joint region	65%
Loss of a leg in the shin region	60%
Total loss of a foot	50%
Loss in the metatarsus region	25%
Loss of a big toe	10%
Loss of 2nd-4th toes, for each toe	4%
Loss of both upper limbs	100%
Loss of an upper limb in shoulder region	75%
Loss of an upper limb in arm region	70%
Loss of an upper limb in elbow joint region	65%
Loss of an upper limb in forearm region	60%
Loss of an upper limb in wrist region	50%
Loss of a thumb	15%
Loss of 2nd-4th fingers, for each finger	5%

1 In case the Insured sustains an injury as a result of a personal accident covered by insurance protection, which is not considered a disability as defined in § 2 (8), but is considered a health impairment as defined in § 2 (34), the Insurance Company shall pay compensation to the Insured in the amount being a sum insured for permanent impairment resulting from a personal accident multiplied by a percentage of health impairment determined by a physician appointed by the Insurance Company and defined in accordance with the Table of impairments specified below.

2 Tables No. 2 and 2A shall apply to Cards in WORLD version, while Tables No. 2, 2A and 2B shall apply to Cards in SPORT version.

§15

Compensation for **health impairment** of the Insured as a result of personal accident

1. In case the Insured sustains an injury as a result of a personal accident covered by insurance protection, which is not considered a disability as defined in § 2 (8), but is considered a health impairment as defined in § 2 (34), the Insurance Company shall pay compensation to the Insured in the amount being a sum insured for permanent impairment resulting from a personal accident multiplied by a percentage of health impairment determined by a physician appointed by the Insurance Company and defined in accordance with the Table of impairments specified below.
2. Tables No. 2 and 2A shall apply to Cards in WORLD version, while Tables No. 2, 2A and 2B shall apply to Cards in SPORT version.

**TABLE NO. 2
ASSESSMENT OF PERMANENT HEALTH IMPAIRMENT DUE TO
PERSONAL ACCIDENT**

No.	Type of impairment	Percentage of permanent health impairment
I. HEAD INJURIES		
1	Injury of cranial vault bones and base depending on extent of damage, herniation and fragmentation	1-10
2	Defects in cranial vault bones of total area - depending on size	
a)	below 10 cm ²	1-10
b)	from 10 to 50cm ²	11-15
c)	above 50 cm ²	16-25
NOTE: In case this bone defect was filled as a result of a plastic surgery with good effect, the percentage of permanent health impairment assessed in accordance with the above-mentioned rule shall be reduced by half.		
II. FACIAL INJURIES		
3	Fracture of nasal bones, nasal septum, injuries of septal cartilage	
a)	visible, unsightly nasal deformation lasting after correction, without breathing and smelling dysfunctions , depending on the extent of the injury	1-5

b)	injury of nasal cartilage and bone structure with breathing dysfunctions lasting after correction, depending on the extent of the injury and level of breathing dysfunctions	6-15
c)	injury of nasal cartilage and bone structure with breathing and smelling dysfunctions lasting after correction, depending on the extent of the injury and level of breathing and smelling dysfunctions	10-20
d)	loss of considerable part of nose or partial loss (including nasal bones)	20-30
4	Loss of teeth:	
a)	permanent incisors and canine teeth - for each tooth	
I.	partial loss of crown (below 5th crown)	0.5
II.	total loss of crown except for root (at least 5th crown)	1
III.	total loss of tooth including a root	2
b)	other teeth - for each tooth	
I.	loss of a crown (at least half of a crown)	0.5
II.	total loss of tooth including a root	1
5	Fracture of orbital bones, jawbones, zygomatic bones, depending on adhesion in displacement, fixed deformations, asymmetry of occlusion, impairment of mastication, disorder of sensation of:	
a)	inconsiderable degree	1-5

b) considerable degree	6-10
6 Fracture of jaw with displacement of bone fragments:	
a) without disorder of functions of temporomandibular joint	3
b) with disorder of functions of temporomandibular joint	8

III. CHEST INJURIES

7

Fractures of (at least two) ribs: a)	
with deformations, but without reduction of respiratory fitness	1-5
with moderate restriction of chest's mobility - of insignificant degree b)	
with reduction of respiratory fitness - depending on degree of reduction	6-10
of respiratory fitness	
c) with medium restriction of chest's mobility -	
with reduction of respiratory fitness - depending on degree of reduction	11-25
of respiratory fitness	
d) with considerable restriction of chest's mobility with considerable	
reduction of respiratory fitness - depending on degree of reduction	26-40
of respiratory fitness	
Fracture of sternum: a)	
without deformations, with confirmed chronic pain syndrome	1-3
with adhesion in displacement, depending on degree of deformations and distress	3-10
b)	
Injury of lungs and pleura (pleural adhesions, impairment of pulmonary tissue, defects of	
pulmonary tissue, extraneous matter,	
etc.): a)	
injury of lungs and pleura without symptoms of respiratory failure	1-5
b) with symptoms of respiratory failure of slight degree - depending on	5-10
degree of reduction of respiratory fitness	
c) with symptoms of respiratory failure of medium degree - depending on	10-25

degree of reduction of respiratory fitness
d) with respiratory failure of considerable degree - depending on the degree of

20-40

of reduction of respiratory fitness NOTE: The degree of impairment of respiratory fitness has to be confirmed by spirometry

IV. ABDOMINAL INJURIES

10

Injury of stomach, entrails, omentum, mesorchium: a)

requiring a surgery without distortions of digestive system

1-5

b) with slight impairment of functions and satisfactory nutrition condition -

6-10

depending on degree of impairments of nutrition condition

c) with impairment of digestion and unsatisfactory nutrition condition - depending on

11-40

degree of impairments of nutrition condition

Injury of anus, sphincter resulting in fixed, total incontinence

60

of faeces and gases

Injury of spleen: a)

loss by persons over 18 years old

15

b) loss by persons below 18 years old

20

Injury of liver, bile tracts, pancreas - depending on complications and disorder of functions a)

without functional disorders, traumatic loss of gallbladder

1-5

b) disorder of liver functions of A degree according to Child-Pugh, disorders of

6-15

pancreas endocrine functions of slight degree or loss of part of the organ, c) disorders of liver functions of B degree according to Child-Pugh

disorder of pancreas endocrine and exocrine functions of medium degree or loss of considerable

16-40

part of the organ

d) disorder of liver functions of C degree according to Child-Pugh, serious disorder of

41-60

pancreas endocrine and exocrine functions

V.	INJURIES OF UROGENITAL ORGANS	
14	Injury of one kidney or both kidneys resulting in impairment of their functions - depending on degree of impairment	5-25
15	Loss of one kidney, while the other one is healthy and functions properly:	30
16	Loss of one kidney and impairment of the other kidney's functions - depending on degree of impairment of the other kidney's functions	35-75
17	Disorder of bladder - depending on degree of reduction of its capacity, disorders while urinating:	
a)	Requiring a surgery without impairment of its functions	3-5
b)	of slight and medium impairment of its functions	6-15
c)	of considerable impairment of its functions	16-30
18	Total loss of phallus:	40
19	Injury or loss of one testicle, ovary and other structures of reproductive system (not specified in other points of the table) - depending on degree of injury and impairment of functions	2-20
20	Loss of both testicles	40
VI.	SPINE INJURIES	
21	Osseous and ligamentous injury of cervical spine confirmed by additional examinations (functional X-ray, CT, MRI):	
a)	with restricted mobility to 25%	3
b)	with restricted mobility from 26% to 50%	10
c)	with restricted mobility from 51% to 75%	17
d)	with restricted mobility above 75%	25
22	Osseous and ligamentous injury of pectoral spine (Th1-Th10) confirmed by additional examinations (functional X-ray, CT, MRI):	
a)	with restricted mobility to 50%	5
b)	with restricted mobility above 50%	15
23	Osseous and ligamentous injury of pectoral and lumbar spine (Th11-L5) confirmed by additional examinations (functional X-ray, CT, MRI):	
a)	with restricted mobility to 25%	4
b)	with restricted mobility from 26% to 50%	10
c)	with restriction of mobility above 50%	20
VII.	PELVIS INJURY	
24	Fracture of pelvis with breaking of pelvic girdle in one or several places - depending on deformation and impairment of movement:	
a)	in anterior segment on one side (pubis bone, pubis bone and ischium)	1-10
b)	in anterior segment on both sides	5-15
c)	in anterior and posterior segment (Malgaigne type)	10-30
d)	in anterior and posterior segment on both sides	20-40
25	Isolated fracture of pelvis bone and sacral bone without breaking of leg girdle:	
a)	fracture of pelvis bone (e.g. fracture of one branch of pubis bone or ischium), sacral bone in one place - without significant deformation and with slight disorders of functions	1-3
b)	fracture of pelvis bone (e.g. fracture of one branch of pubis bone or ischium), sacral bone in one place - with deformation and disorders of functions	4-8
c)	fracture of pelvis bone and/or sacral bone in several places - without significant deformation and with slight disorders of functions	2-7
d)	fracture of pelvis bone and/or sacral bone in several places - with deformation and disorders of functions	5-15

VIII. UPPER LIMB INJURIES - SCAPULA		Right (dominant)	Left
26	Fracture of a scapula		
a)	fracture of a scapula with slight displacement and small distortions of limb's functions	1-5	1-3
b)	fracture of scapula with clear displacement and slight impairment of limb's functions - with restrictions of mobility up to 30% - depending on degree of limb's impairment	6-12	4-9
c)	fracture of scapula with clear displacement and medium impairment of limb's functions - with restrictions of mobility from 31% to 50% - depending on degree of limb's impairment	13-20	10-15
d)	fracture of scapula with clear displacement and considerable impairment of limb's functions - with restrictions of mobility above 50% - depending on degree of limb's impairment	21-40	16-30
CLAVICLE		Right	Left
27	Condition after malhealing of clavicle fracture depending on degree of deformation and restriction of mobility:		
a)	slight deformation with restriction of mobility of glenohumeral and scapular joint up to 20%	1-8	1-6
b)	deformation with clear restriction of mobility of glenohumeral and scapular joint above 20%	9-20	7-15
SHOULDER - GLENOHUMERAL AND SCAPULAR JOINT		Right	Left
28	Fractures of proximal humerus epiphysis or head - depending on restriction of movements, displacements and deformations of broken humerus head, etc.:		
a)	slight changes with restricted mobility to 30%	1-11	1-7
b)	medium changes with restricted mobility from 31 to 50%	12-19	8-14
c)	big changes with restricted mobility above 50%	20-35	15-30
ARM		Right (dominant)	Left
29	Fracture of humerus shaft - depending on displacements, restrictions of movement in glenohumeral and scapular joint and elbow joint:		
a)	impairment of limb's functions with restrictions of mobility in glenohumeral and scapular joint and elbow joint up to 30%	1-15	1-10
b)	impairment of limb's functions with restrictions of mobility in glenohumeral and scapular joint and elbow joint above 30%	16-30	11-25
ELBOW JOINT		Right (dominant)	Left
30	Fractures in elbow region (distal humerus epiphysis, proximal radial and elbow epiphysis) - depending on disorders of an, restriction of movements in elbow joint:		
a)	slight changes with restricted mobility to 20%	1-5	1-4
b)	medium changes with restricted mobility from 21 to 50%	6-15	5-10
c)	big changes with restricted mobility above 50%	16-30	11-25
FOREARM		Right (dominant)	Left
31	Fractures in the region of distal ephiphysis of one or both forearm bones, resulting in restrictions of wrist's mobility and deformations - depending on impairment of functions		
a)	slight changes with restricted mobility to 30%	1-6	1-5

b)	medium changes with restricted mobility from 31 to 60%	7-15	6-10
c)	big changes with restricted mobility above 60%	16-25	11-20
32	Fractures of shafts of one or both forearm bones - depending on deformations and functional distortions		
a)	slight changes	1-6	1-5
b)	medium changes	7-15	6-10
c)	big changes, secondary changes and other	16-30	11-25
WRIST		Right (dominant)	Left
33	Fracture of wrist bones - depending on deformations, instability, impairment of functions and other secondary changes:		
a)	slight changes with restricted mobility to 30%	1-6	1-5
b)	medium changes with restricted mobility from 31 to 60%	7-15	6-10
c)	big changes with restricted mobility above 60%	16-25	11-20
METACARPUS		Right	Left
34	Fracture of metacarpus bones - depending on deformations and impairment of hand's or fingers' functions and other secondary changes:		
a)	1st metacarpus bone (depending on thumb's functions):		
I.	with restricted thumb mobility to 30%	1-6	1-5
II.	with restricted mobility from 31 to 60%	7-12	6-9
III.	with restricted mobility above 60%	13-20	10-15
b)	2nd metacarpus bone (depending on mobility of the index finger)		
I.	with restricted mobility to 30%	1-5	1-3
II.	with restricted mobility from 31 to 60%	6-9	4-6
III.	with restricted mobility above 60%	10-15	7-10
c)	3rd metacarpus bone (depending on mobility of the third finger and other secondary changes)		
I.	with restricted mobility from 20 to 50%	1-2	1
II.	with restricted mobility above 50%	3-5	2-4
d)	4th and 5th metacarpus bone (depending on mobility of relevant fingers and other secondary changes) - a separate assessment for each metacarpus bone:		
I.	with restricted mobility from 20 to 50%	1-2	1
II.	with restricted mobility above 50%	3-4	2
THUMB		Right (dominant)	Left
35	Fracture of a thumb - depending on restriction of thumb's mobility and hand's function and secondary changes		
a)	slight changes with restricted mobility to 25%	1-5	1-3
b)	medium changes with restricted mobility from 26 to 50%	6-10	4-8
c)	considerable changes with restricted mobility from 51 to 75%	11-15	9-12
d)	very big changes with restricted mobility above 75%	16-20	13-15
INDEX FINGER		Right (dominant)	Left
36	Fracture of index finger area - depending on deformations, disorder of sensation, restriction of finger's mobility, impairment of hand's functions, joint contracture		

	and other secondary changes - depending on degree:		
a)	slight changes with restricted mobility to 20%	1-3	1-2
b)	medium changes with restricted mobility from 21 to 40%	4-6	3-4
c)	big changes with restricted mobility from 41 to 70%	7-11	5-7
d)	considerable changes with restricted mobility above 70%	12-15	8-10
THIRD, FOURTH AND FIFTH FINGER		Right (dominant)	Left
37	Fractures in the region of 3rd, 4th or 5th fingers - depending on deformations, impairment of sensation, restrictions of finger's movements, joint contracture and other secondary changes - for each finger, depending on degree:		
a)	3rd finger:		
I.	restriction of mobility to 50% without secondary changes	1-2	1-2
II.	restriction of mobility above 50% without secondary changes	3-5	3-4
III.	restriction of mobility to 50% with secondary changes	1-5	1-4
IV.	restriction of mobility above 50% with secondary changes	6-10	5-8
b)	4th and 5th finger:		
I.	restriction of mobility to 50% without secondary changes	1-2	1
II.	restriction of mobility above 50% without secondary changes	3-4	2
III.	restriction of mobility to 50% with secondary changes	1-4	1-2
IV.	restriction of mobility above 50% with secondary changes	5-8	3-4
IX. BOTTOM LIMB INJURIES - HIP JOINT			
38	Fracture of hip joint cavity, fractures of proximal femur epiphysis, fracture of cervix, trochanteric fractures, femur epiphysiolysis - depending on degree of movement restrictions, deformations and other secondary changes:		
a)	slight changes with restricted mobility to 30%	2-12	
b)	medium changes with restricted mobility from 31 to 60%	13-24	
c)	big changes with restricted mobility above 60%	25-40	
THIGH			
39	Fracture of femur - depending on deformations, shortening, restrictions of movement in hip and knee joints, disorders of movement, impairment of limb's functions and other secondary changes:		
a)	shortening from 1 to 3 cm without secondary changes	5-10	
b)	shortening from 3.1 to 5 cm without secondary changes	11-20	
c)	shortening above 5 cm without secondary changes	21-30	
d)	slight changes with shortening to 3 cm	10-15	
e)	medium changes with shortening from 3.1 to 5 cm, medium impairment of movements	16-29	
f)	big changes with shortening above 5 cm, considerable impairment of movements	30-40	
KNEE			
40	Fracture of knee joint bones - depending on deformations, contractions impairment of movements, joint stability and other secondary changes:		
a)	loss of mobility within 0-40 degrees, for each 2 degrees of defect in movement	1	
b)	loss of mobility within 41-90 degrees, for each 5 degrees	1	
c)	loss of mobility within 91-120 degrees, for each 10 degrees of defect in movement	1	

SHIN		
41	Fracture of shin bone - depending on deformations, shortening, restrictions of movement in ankle joint and other secondary changes:	
a)	shortening from 1 to 3 cm without secondary changes	3-10
b)	shortening from 3.1 to 5 cm without secondary changes	11-20
c)	shortening above 5 cm without secondary changes	21-30
d)	slight changes with shortening from 0 to 3 cm	5-15
e)	medium changes with shortening from 3.1 to 5 cm	16-29
f)	big changes with shortening above 5 cm	30-40
42	Isolated fracture of fibula - depending on displacements, deformations, impairment of limb's functions	1-3
TALOCRURAL JOINT AND TALOCALCANEAL JOINT, FOOT		
43	Fractures of distal epiphysis of shin or calcanean bones - depending on lasting distress and restriction of functions:	
a)	slight changes with restricted mobility to 20%	1-4
b)	medium changes with restricted mobility from 21 to 50%	5-10
c)	big changes with restricted mobility above 50%	11-20
44	Fracture of tarsus bones - depending on displacements, deformations of foot	
a)	inconsiderable changes with restricted mobility to 20%	1-4
b)	medium changes with restricted mobility from 21 to 50%	5-10
c)	considerable changes with restricted mobility above 50%	11-20
45	Fracture of metatarsal bones - depending on displacements, deformations of a foot, statical and dynamical distortions and other secondary changes	
a)	1st or 5th metatarsal bones:	
I.	slight changes without deformations	1-4
II.	considerable changes, deformation, restriction of foot's mobility	5-10
b)	2nd, 3rd or 4th metatarsal bones:	
I.	slight changes	1-3
II.	considerable changes, with deformation and restriction of foot's mobility	4-7
c)	fracture of three or more metatarsal bones - depending on deformations and functional distortions	3-15
TOES		
46	Fracture of a big toe - depending on extent of changes and restriction of mobility	
a)	slight changes with restricted mobility to 30%	1-2
b)	medium changes with restricted mobility from 31 to 50%	3-4
c)	big changes with restricted mobility above 50%	5-7
47	Fracture of 2nd, 3rd, 4th and 5th finger	1-5

TABLE NO. 2A ASSESSMENT OF PERMANENT HEALTH IMPAIRMENT DUE TO PERSONAL ACCIDENT - BURNS, FROSTBITES

1.	Second-degree burns below 1% of total body surface area (TBSA)	1
2.	Second-degree burns 1-2% of total body surface area (TBSA)	2
3.	Second-degree burns 3-14% of total body surface area (TBSA)	6
4.	Second-degree burns 15-30% of total body surface area (TBSA)	12
5.	Second-degree burns above 30% of total body surface area (TBSA)	35

6.	Third-degree burns below 1% of total body surface area (TBSA)	2
7.	Third-degree burns 1-2% of total body surface area (TBSA)	5
8.	Third-degree burns 3-10% of total body surface area (TBSA)	10
9.	Third-degree burns 11-30% of total body surface area (TBSA)	25
10.	Third-degree burns above 30% of total body surface area (TBSA)	50
11	Burns of the respiratory track treated in hospital	25
12.	Second- and third-degree frostbites of one finger or toe	1
13.	Second- and third-degree frostbites of more than one finger or toe	4
14.	Second- and third-degree frostbites of a nose or pinna	4
TABLE NO. 2 B		
ASSESSMENT OF PERMANENT HEALTH IMPAIRMENT DUE TO PERSONAL ACCIDENT - DISLOCATION		
CLAVICLE		
Dislocation of acromioclavicular joint or sternoclavicular articulation		
a)	first-degree	1.5
b)	second-degree	3.0
c)	third-degree	4.5
SHOULDER		
Dislocation of shoulder joint, excluding habitual dislocations		6.5
ELBOW JOINT		
Dislocation of elbow joint		5.0
WRIST		
Dislocation of wrist bones		5.5
FINGERS 1st - 5th		
Dislocation of interphalangeal joints or metacarpophalangeal joint's		1.5
HIP		
Dislocation of hip joint		20
KNEE		
a)	Dislocation of knee joint - depending on restriction of movements, joint stability, limb's statical and dynamical fitness	8-20
b)	Impairment of one collateral or cruciate ligament	5
c)	Impairment of two collateral or cruciate ligaments	8
d)	Impairment of three or more collateral or cruciate ligaments	15
FOOT - TALOCRURAL JOINT AND TALOCALCANEAL JOINT		
a)	Total dislocation of talocrural joint	12
b)	Total dislocation of foot joints, excluding intermetatarsal joint's and toe joints	6

- 1 The percentage of health impairment for particular types of health impairments resulting from one personal accident shall be totalled, while its sum cannot exceed 100%.
- 2 In case bodily injuries of different organs qualify for compensation both for disability and permanent health impairment, these payments shall be totalled.
- 3 In case the Insured receives compensation for permanent health impairment

and this injury will result in permanent disability, then compensation for this disability shall be paid after deduction of the amount paid due to permanent health impairment.

§ 16 Compensation for **hospitalisation** of the Insured as a result of personal accident

1. In case the Insured is hospitalised as a result of a personal accident covered by insurance protection, the Insurance Company shall pay compensation to the Insured in the amount resulting from the table below: Table of compensation Amount of compensation Type of compensation

1 The percentage of health impairment for particular types of health impairments resulting from one personal accident shall be totalled, while its sum cannot exceed 100%.

2 In case bodily injuries of different organs qualify for compensation both for disability and permanent health impairment, these payments shall be totalled.

3 In case the Insured receives compensation for permanent health impairment and this injury will result in permanent disability, then compensation for this disability shall be paid after deduction of the amount paid due to permanent health impairment.

§ 16 Compensation due to **hospitalisation of the Insured** as a result of personal accident

1. In case the Insured is hospitalised as a result of a personal accident covered by insurance protection, the Insurance Company shall pay compensation to the Insured in the amount specified in the table below: Table of compensation Amount of compensation Type of compensation

Hospitalisation up to 7 days	80 PLN
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Hospitalisation over 7 days	160 PLN
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2. The right to compensation is established on the basis of medical documentation, in particular a hospital treatment report.

§ 17 Compensation paid to the Insured as a refund of costs of **purchase or repair of prostheses and auxiliary materials**

The Insurance Company shall refund costs of purchase or repair of prostheses and auxiliary materials to the Insured, which are not covered by public health or social insurance, provided that this purchase or repair was instructed by a physician due to a personal accident covered by insurance protection. The refund shall be made on the basis of original receipts or invoices to the maximum amount of 2,500 EUR. Determination of compensation

§ 18

1 Types and amount compensation due shall be determined after establishing a causal link between a sudden event caused by an external factor and death or permanent health impairment.

2 Type of health impairment/disability as well as percentage of health impairment/disability shall be determined after the end of medical treatment and rehabilitation, however, in case such treatment or rehabilitation does not end within 360 days from the day of the personal accident, type of health impairment/disability and percentage of health impairment/disability may be determined before the end of treatment and rehabilitation at the request of the Insured unless the level of health impairment/disability raises any doubts.

3 Type and percentage of health impairment/disability shall be determined on the basis of medical documentation and in case of doubts - on the basis of medical examinations instructed by the Insurance Company and carried out by a physician appointed by the Insurance Company. The Insurance Company shall incur costs of these examinations.

4 Another compensation paid to the Insured for health impairment/disability cannot exceed the amount of compensation resulting from the difference between the amount of compensation due for health impairment/disability of 100% and the total of compensations paid to the Insured so far for health impairment resulting from a personal accident.

5 In case of a loss or an injury of an organ or system whose functions had already been limited before the personal accident due to an illness or disability, the level of permanent health impairment shall be determined as a difference between the level of permanent health impairment for an organ or system after the personal accident and the level of permanent health impairment existing before the personal accident.

6 In case the Insured dies due to reasons not resulting from the personal accident and the level of permanent health impairment/disability had not been determined, this level shall be defined by physicians appointed by the Insurance Company.

7 In case the Insured sustained a permanent health impairment/disability due to a personal accident and then died as a result of this personal accident, the Insurance Company shall pay compensation only for death. In case the Insurance Company has already paid a compensation for a permanent health impairment/disability before death of the Insured, the amount of compensation for death shall be a difference between 50% of the sum of personal accident insurance and the amount of compensation for permanent health impairment/disability that has been paid.

Sum insured for consequences of personal accidents

§ 19

The sum insured as well as limits and sub-limits of sum insured for consequences of personal accidents are defined in the Table contained in § 28. Limitation and exclusion of liability

§ 20

1. Regardless of general exclusions referred to in § 33, the Insurance Company shall not be held liable in the case of:

1) medical treatment undergone by the Insured, unless it was connected with treatment of consequences of personal accident and was instructed by a physician;

- 2) intoxication with solid or liquid substances that penetrated into the organism through the digestive system; 3) occupational disease and other diseases, even those occurring suddenly or after the personal accident; 4) pregnancy or labour distortions; 5) driving a car or any other vehicle by the Insured without required permits; 6) congenital defects, tropical diseases; 7) infections subject to the fact that the insurance protection applies to situations where as a result of wounds sustained in a personal accident the Insured was infected with a virus or pathogenic bacteria, while these wounds shall not include skin and mucous membrane abrasion; consequences of viral or bacterial infections resulting from abrasions during a personal accident or at a later time shall not be covered by the insurance protection, however, these limitations shall not apply to rabies and tetanus;
- 8) ventral hernia or inguinal hernia, however, the insurance protection covers a situation when ventral hernia or inguinal hernia occurred as a result of a personal accident;
- 9) injuries of intervertebral discs, internal organ bleeding, however, the insurance protection covers a situation when they were caused by a personal accident;
- 10) brain hemorrhages, heart attacks, strokes; 11) working without permits and permissions required under the law of the country where the work is provided.

2. Insurance protection in WORLD Card version shall cover the following risks:

- 1) practising amateur summer and winter sports (except for amateur sports not specified in the definition of amateur summer and winter sports contained in § 2 (1) and all team-building activities;
- 2) practising high-risk sports; 3) practising professional and competitive sports; 4) practising extreme sports.

3. Insurance protection in SPORT Card version shall cover the following risks:

- 1) practising amateur summer and winter sports, including those specified in the definition of amateur summer and winter sports contained in § 2 (1) and all team-building activities;
- 2) practising high-risk sports; 3) practising professional and competitive sports; 4) practising extreme sports.

CIVIL LIABILITY OF THE INSURED

Subject and scope of insurance

§ 21

The insurance covers civil liability of the Insured in private life for personal (murder, bodily injury or disorder of health) or proprietary (destroying or damaging property) damage caused by a delict to third parties during a trip abroad, which the Insured shall remedy under the law of the country where he resides.

§ 22

Within the scope of civil liability, the Insurance Company shall be held liable only for damages resulting from acts or failure to act by the Insured and provided that the event resulting in damage occurred during the term of the Insurance Company's liability, and as a consequence of this event a claim against the Insured has been filed.

§ 23

1. Within the limits of liability the Insurance Company shall: 1) examine legitimacy of claims filed against the Insured; 2) cover justified costs to prevent the extent of damage from increasing; 3) cover costs of expert opinions, appointed with approval of the Insurance Company to examine circumstances or extent of damage;
- 4) pay compensation which the Insured shall award to the injured person for damage covered by an agreement on the basis of an out-of-court settlement concluded or approved by the Insurance Company, consideration or final court judgement.
- 5) cover costs for hiring a defence attorney to represent interests of the Insured during court proceedings in case this attorney was appointed by the Insurance Company or with its approval.

1 The upper limit of the Insurance Company's liability towards one Insured in respect of all insurance events occurring during the term of insurance shall be a total of civil liability insurance, regardless of the number of persons that caused or contributed to damage.

2 In case of violation of the obligation referred to in § 35 (4) (2), the Insurance Company shall be exempt from the obligation to pay compensation, unless the Insured could not act otherwise due to circumstances of the event.

Guarantee amount

§ 24

The guarantee amount as well as limits and sub-limits of guarantee amount for civil liability of the Insured are defined in the Table contained in § 28. Limitation of liability

§ 25

1. Regardless of the exclusions referred to in § 33, the Insurance Company shall not be liable for damage resulting from possession of the following during a trip abroad: 1) dogs; 2) horses; 3) wild and exotic animals; 4) bladed or stabbing weapons and firearms as well as their use for sport or self-defence purposes.

1 The Insurance Company shall not extend insurance protection to damage not exceeding the equivalent of 250 EUR in respect of each event occurring during the term of Insurance Company's liability, and any services and compensation due to the injured person for any of the above-mentioned events shall be reduced by the said amount.

2 The Insurance Company shall not extend insurance protection to mutual claims filed by persons for the benefit of whom an insurance agreement was executed, as well as by relatives or affinities against persons for the benefit of whom an insurance agreement was executed.

- 3 Regardless of general exclusions referred to in § 33, the Insurance Company shall not be held liable for damage: 1) caused to relatives; 2) caused intentionally by persons for whom the Insured shall be held liable; 3) giving rise to compensation from obligatory civil liability insurance; 4) resulting from possessing, driving, using or starting vehicles, aircrafts or watercrafts; 5) caused as a result of transmitting a disease to another person; 6) caused as a result of a standard use of an item or its technical wear and tear; 7) being a consequence of contractual liability (for failure to perform or improper performance of an obligation); 8) resulting from providing work, practising profession or pursuing business activity by the Insured;
- 9) occurring in Poland or country of residence; 10) connected with practising high-risk sports; 11) connected with practising professional and competitive sports or participating in sport competitions, races, performances and trainings; 12) connected with practising extreme sports; 13) connected with practising amateur summer and winter sports.
5. For holders of Cards in SPORT version the scope of civil liability insurance shall be extended to practising amateur summer and winter sports, high-risk sports, extreme sports and professional and competitive sports to the guarantee amount being an equivalent of 5,000 EUR. In the case of civil liability of the Insured for damage to property connected with practising the above-mentioned sports, the total amount of compensation paid by the Insurance Company shall not exceed 10% of the guarantee amount.

SECTION III. COMMON PROVISIONS

Contents of insurance agreement

§ 26

By entering into an insurance agreement, the Insured shall release physicians and health care centres providing treatment nationwide and abroad from the obligation to keep medical secret and shall agree for making medical documentation available to representatives of the Insurance Company. Execution of insurance agreement

§ 27

1 Execution of an insurance agreement shall be confirmed by an insurance document (EURO26 Card in WORLD or SPORT variant).

2 The insurance document shall contain at least the following data: 1) First name and name of the Insured, 2) Expiry date of EURO 26 Card, 3) Number of EURO 26 Card.

Sum insured and guarantee amount

§ 28

1 The sum insured and the guarantee amount shall be upper limit of the Insurance Company's liability in respect of one Insured for all damages covered by insurance protection, resulting from one event, regardless of the total number of events occurring during the term of insurance.

2 The sum insured and the guarantee amount shall be reduced by each amount of service or compensation paid under an insurance agreement for which these sums were defined in respect of one Insured.

3 The sum insured and the guarantee amount for WORLD and SPORT Cards have been provided in the table below:

SCOPE OF INSURANCE	SUM INSURED and upper liability limits
Accident insurance - permanent impairment	5,000 EUR
Accident insurance - death	2,500 EUR
Disability due to personal accident	5,000 EUR
Hospitalisation of the Insured due to personal accident	80 PLN up to 7 days; 160 PLN over 7 days
Reimbursement of costs of prostheses and auxiliary materials	2,500 PLN
KL (medical payment insurance with assistance)	60 EUR
Ambulatory treatment	2 EUR
Transport of the Insured to a medical facility, between medical facilities	Sum insured of medical expenses
Dental treatment	250 EUR
Repair or purchase of prostheses, glasses	10% of the amount of the medical payment insurance
Transport of the Insured to Poland	Sum insured of medical expenses
Transport of the Insured body	Sum insured of medical expenses
Purchase of a coffin, or costs of cremation and purchase of an urn	1,250 EUR
Costs of food and accommodation of assisting person	100 EUR per day up to 7 days
Costs of travel of person summoned for assistance	1,000 EUR; 100 EUR per day up to 7 days
Costs of transport of the Insured to continue travel	500 EUR
Civil liability in private life	20,000 EUR
Civil liability related to practising sports (only in SPORT Card variant)	5 EUR
KR (Rescue costs insurance) (only in SPORT Card variant)	5 EUR

Term of insurance

§ 29

- 1 The Insurance Company's liability shall commence on the date specified in the application for EURO 26 Card as a start date for the term of insurance, however, no earlier than the day following the day when the Card was issued and an insurance premium was paid.
- 2 The Insurance Company's liability shall end on the date specified in the insurance document (EURO 26 Card) as the expiry date of EURO 26 Card.
- 3 In case the person for the benefit of whom an insurance agreement is executed is abroad - the Insurance Company's liability shall commence 7 days after the date the insurance premium was paid. The Insurance Company shall charge the insurance premium only for the term of insurance protection.
- 4 The insurance protection for medical payment insurance and immediate assistance, rescue costs and civil liability insurance shall commence as of the moment of crossing the border of Poland or country of residence when leaving the country and shall end the moment of crossing the border when returning to Poland.
- 5 The insurance protection for personal accident insurance shall last 24 hours a day in all the countries of the world, including Poland, however, excluding the USA and Canada.

Termination of insurance agreement

§ 30

1. The Insured is entitled to withdraw from the insurance agreement executed for the term longer than 6 months within 30 days and in case the Insurer is an entrepreneur - within 7 days from the date of execution of an agreement. Withdrawal from the insurance agreement shall not release the Insured from the obligation to pay the insurance premium for the term when the Insurance Company provided the insurance protection.
2. Withdrawal from the insurance agreement shall not result in deduction of administrative costs. Determination and payment of compensation and services

§ 31

- 1 In case the Insured failed to perform any obligation specified herein intentionally or due to gross negligence and this affected the scope of Insurance Company's liability or the amount of services or compensation, the Insurance Company may refuse to pay compensation or provide services to the extent the failure to perform these obligations contributed to the increase of damage or amount of compensation paid by the Insurance Company or prevented the Insurance Company from determining circumstances and consequences of the accident.
- 2 Legitimacy of claims, value of services and amount of compensation shall be determined on the basis of full documentation specified herein or indicated by the Insurance Company, submitted by the Insured, an authorised person or a third party.
- 3 Within 7 days from receipt of a notification about the occurrence of an event covered by the insurance protection the Insurance Company shall inform the person filing a claim in writing or in any other form approved by this person about documents required for determining the right and value of service and amount of compensation if it is necessary for further proceedings. The previous sentence and provisions of point 2 shall not apply to assistance insurance (providing help for persons experiencing difficulties during a trip or absence in the place of residence) in case services are provided directly after informing about the event covered by insurance protection or without determining the actual circumstances of the event, legitimacy of claims and amount of compensation.
- 4 The Insurance Company shall provide services or pay compensation due within 30 days from the date of being informed about the accident.

5 In case it is impossible to explain circumstances required for determining Insurance Company's liability or value or services or amount of compensation within the term defined in point 4, the service shall be provided or compensation shall be paid within 14 days from the day it was possible to explain these circumstances when exercising due care, however, the undisputed part of service or compensation shall be paid by the Insurance Company within the term defined in point 4.

1 In case the Insurance Company does not provide services or pay compensation within the terms defined in the points above, the Insurance Company shall inform the person filing a claim in writing about reasons for impossibility to satisfy claims.

2 Services shall be provided or compensation shall be paid in Poland in PLN according to an average exchange rate from the last table of the National Bank of Poland, announced before the date of providing services or paying compensation, except for costs directly refunded abroad to service providers as well as costs of services or compensation paid abroad for civil liability.

3 In case services or compensation do not apply or apply in a different amount than the one defined in claim, the Insurance Company shall inform the person filing this claim in writing, indicating circumstances and legal grounds that justify the total or partial refusal to provide services or pay compensation and instructing

about a possibility to assert claims in court proceedings.

9. In case a person asserting services or compensation does not agree with arrangements made by the Insurance Company as regards refusal to satisfy a claim or value of service or amount of compensation, this person may appeal to the Insurance Company within 30 days from the receipt of notification.

10. In case the Insured dies after acquiring a right to be paid compensation due to events covered by insurance protection, the Insurance Company shall pay this compensation to heirs of the Insured.

Transfer of claims to Insurance Company

§ 32

1 Claims of the Insured towards the third party responsible for damage shall be transferred to the Insurance Company as of the day of paying compensation by the Insurance Company up to the amount of this compensation.

2 A claim of the Insured towards persons residing together with the Insured or for whom the Insured is responsible shall not be transferred to the Insurance Company.

3 In the case of an accident, the Insured shall secure the possibility to assert liability claims towards persons responsible for damage.

4 In case the Insured renounces a claim to the person responsible for damage without approval of the Insurance Company or performs obligations defined in point 3 in improper manner, the Insurance Company shall be released from the obligation to provide services to the extent it was impossible to assert retrospective claims from the person responsible for damage. In case such situation is disclosed or occurs after the compensation is paid, the Insured shall return the part of compensation at request of the Insurance Company, from which the Insurance Company would be released in accordance with rules provided in the preceding sentence.

General exclusion of Insurance Company's liability

§ 33

1 The Insurance Company shall not be held liable for damage resulting from intentional activity or gross negligence or failure to act by the Insured unless payment of compensation in these

circumstances complies with rules of equity.

2 The Insurance Company shall not be held liable for damage occurring during a trip abroad in case its aim is to take up treatment by the Insured.

3 Insurance protection provided by the Insurance Company shall not cover events resulting from:

- 1) warfare, acts of terror, martial law, state of emergency or participation of the Insured in riots, disturbances, strikes, manifestations, road blockades and struggles, subject to the fact that the insurance protection is extended during a trip abroad to injuries sustained by the Insured during warfare, acts of terror or civil war; the above-mentioned protection shall expire with the end of 7th day from the start of war, acts of terror or civil war in the country where the Insured resides; liability of the Insurance Company shall not apply when a trip abroad is made to the country where a war or civil war is in progress as well as when the Insured takes an active part in war, acts of terror or civil war; the Insurance Company shall not extend insurance protection to accidents resulting from nuclear, biological or chemical weapons;
- 2) participation in bets;
- 3) mental illness, mental retardation or mental disorders of the Insured and their consequences; 4) attacks of convulsion or epilepsy; 5) accident due to drinking alcohol by the Insured, taking drugs, medicaments or other intoxicants, driving a vehicle without permits required under the law of a particular country or attempting to commit or committing a crime;
- 6) participating in motor vehicles and motorboat races, driving on the sections used for fast driving, rallies as well as driving motor vehicles in any other way including rivalry;
- 7) accidents in which the Insured was involved when participating as a driver or a passenger of a motor vehicle together with exercises or trainings accompanying these events which aim at driving at the highest speed;
- 8) air accidents in case the Insured was a driver or a passenger of a plane belonging to non-licensed airlines; 9) performing military service in the army; 10) suicide or attempting to commit suicide, self-harm by the Insured;
- 11) events occurring in the USA and Canada.

Obligations of the Insured and proceedings connected with medical payment and immediate assistance insurance and personal accidents insurance

§ 34

1. The Insured shall prevent damage from being increased and limit its consequences, if possible.

2. In the case of an event covered by an insurance agreement, the Insured or a person acting on his behalf shall: 1) report a request for help to the Emergency Centre unconditionally and immediately by phone before taking any actions on his own, regardless if the event results in liability of the Insurance Company or not; the phone number of the Emergency Centre is given on the insurance policy, is open 7 days a week, 24 hours a day; information is provided in Polish;

2) explain circumstances the Insured is in in details, define required help and provide the following information to an employee of the Emergency Centre:

a. number of insurance document (EURO 26 Card);

- b. forenames and surname of the Insured;
- c. phone number to be used by the Emergency Centre to contact the Insured

or his representative; 3) provide access to physicians of the Emergency Centre to all medical information; 4) comply with instructions of the Emergency Centre by providing information and required

powers of attorney;

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.

- 5) make it available for the Emergency Centre to take measures required for determining circumstances of damage, legitimacy and amount of compensation as well as provide necessary help and explanations.

In case the Insured failed to perform obligations referred to in point 2 above due to reasons beyond his control and in case the Insured incurred costs of medical treatment or immediate assistance, the Insured shall file a claim to the Insurance Company in writing within 7 days from the return to Poland or country of residence. Documentation shall be sent to the address of the Insurance Company specified in the insurance policy. In the case of violation of obligations specified in preceding points due to wilful misconduct or gross negligence, the Insurance Company may reduce services to the extent this violation contributed to the increase of damage or made it impossible for the Insurance Company to determine circumstances and consequences of the accident. Report of a claim for provision of service or payment of compensation due to medical payment insurance and immediate assistance shall contain:

- 1) number of insurance document (EURO 26 Card); 2) detailed description of circumstances of the event; 3) medical certificate describing a type and character of injuries, including a detailed diagnosis and instructed treatment;
- 4) all original invoices and bills, hospital reports, original receipts which will make it possible for the Insurance Company to determine total costs of treatment incurred by the Insured.

In case of a personal injury, the Insured shall visit a physician immediately, however, not later than within 24 hours, and comply with his instructions as well as take actions aiming at reducing consequences of the accident, in particular the Insured shall undergo treatment instructed by the physician, which shall be understood as any forms of therapies, surgeries, rehabilitation and any medical activities aiming at improving health condition of the Insured in respect of impairment sustained due to the accident. In the event of a personal accident, the Insured shall:

- a. report the indemnifiable event covered by insurance protection to the Insurance Company in writing within 3 months from the event,
- b. obtain medical documentation providing medical diagnosis,
- c. send a form for "reporting damage" to the Insurance Company, including any other documents required for determining legitimacy and amount of compensation, including e.g. medical documentation from the place of event, confirming circumstances of the accident and type of injury, and in the absence of such documentation - other evidence confirming the accident as well as

documents entitling to drive a vehicle and original bills within 3 years from the date of event, d. provide any information required by the Insurance Company. In case the Insured dies, the Claimant specified personally shall submit an identity card and a copy of death certificate apart from documents set out in point 7 (c), and in the absence of a person specified personally - a family member claiming for compensation shall submit documents confirming kinship or affinity with the Insured. At the request of the Insurance Company the Insured shall

- 1) be subject to medical or diagnostic examinations with minimum risk, excluding genetic examinations, to determine health condition or the level of permanent health impairment; costs of these examinations shall be borne by the Insurance Company;
- 2) make results of these examinations or medical documentation on the course of treatment available to the Insurance Company or give consent for the Insurance Company to apply to relevant persons or institutions for making this data or these documents available;
- 3) grant a written consent to the Insurance Company to apply to entities providing health services to the Insured in order to receive information verifying data submitted by the Insured on his health condition, determine right to be provided services from the insurance agreement and amount of compensation as well as release these entities from the obligation to keep information on health services provided to the Insured secret.

Obligations of the Insured and proceedings in case of damage from civil liability insurance

§ 35

1 The Insured shall prevent damage from being increased and limit its consequences, if possible.

2 In case the Insured is informed about court proceedings being instituted against him, the Insured shall notify the Insurance Company about it, even if the indemnifiable event has already been reported.

3 The Insurance Company shall not be held liable for costs resulting from lack of consent of the Insured for concluding an out-of-court settlement with the injured or satisfying this person's claims.

4. After each event resulting in damage being caused by the Insured, the Insured shall: 1) inform the Emergency Centre immediately, however, not later than within 7 days from the date of event which may impose a civil liability on the Insured and comply with instructions of the Emergency Centre; 2) not accept or satisfy claims of the injured person without approval of the Emergency Centre, or conclude any agreement or out-of-court settlement with this person in respect of claims; 3) grant a power of attorney to the person indicated by the Emergency Centre to plead case or appeal in court of civil law in case the injured person filed a claim against the Insured, if such request is reported by the Emergency Centre;
- 4) provide the Emergency Centre with any demand, petition and any other procedural writs serviced to the Insured;
5. In the case of violation of obligations specified in point 4 above due to wilful misconduct or gross negligence, the Insurance Company may reduce services to the extent this violation contributed to the increase of damage or made it impossible for the Insurance Company to determine circumstances and consequences of the accident.

Obligations of Insurance Company

§ 36

1 The Insurance Company shall provide services in the case of an indemnifiable event under rules set out herein.

2 The Insurance Company shall keep

data relating to persons defined in insurance documentation secret in accordance with applicable provisions of law. Complaints and appeals

§ 37

1 In any case an interested party may file complaints and appeals to the Management Board of the Insurance Company.

2 Any complaints and appeals may be filed directly in the registered office of the Insurance Company or sent in writing to its address. They shall specify data which makes it possible to identify a person filing a complaint or appeal as well as its scope.

3 Complaints and appeals shall be considered immediately, however, not later than within 30 days from their receipt by the Insurance Company. In case it is impossible to consider a complaint or an appeal in the above-mentioned 30-day term, the Insurance Company shall inform the person filing a complaint or appeal about it not later than within 14 days from the date when such

consideration was possible when exercising due care.

4 A person who filed a complaint or an appeal shall be informed about the manner in which such complaint or appeal is to be considered immediately after this consideration in writing or in any other form agreed with the person filing the complaint or the appeal.

5 Regardless of the foregoing, a body competent for consideration of complaints relating to the activity of the Insurance Company is the Ombudsman of the Insured. Competent court

§ 38

Claims action under an insurance agreement can be brought to a court of general jurisdiction or a court having jurisdiction over the place of residence or registered office of the Insurer, Insured or any other person entitled to receive compensation. Final provisions

§ 39

Any notices and statements relating to execution and performance of the insurance agreement shall be made in writing under pain of nullity, unless otherwise provided herein.

§ 40

In matters not regulated herein the provisions of the Polish law shall apply, in particular the Polish Civil Code and the Insurance Activity Act.

§ 41

These SWU were adopted by a resolution of the Management Board of the Insurance Company No. 1/02/06/2010 of 2 June 2010 and shall become effective as of 15 June 2010, with later amendments introduced by a resolution of the Management Board of the Insurance Company No. 1/06/10/2011 of 6 October 2011, becoming effective as of 15 October 2011.



Insurance certificate

of holder of Euro 26 World Card

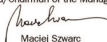
AXA Towarzystwo Ubezpieczeń i Reasekuracji S.A. potwierdza, iż na mocy Umowy Generalnej nr 11282/B, zawartej pomiędzy AXA Towarzystwem Ubezpieczeń i Reasekuracji S.A. z siedzibą w Warszawie, ul. Chłodna 51 a Youth Projects Managements Sp. z o.o. z siedzibą w Sopocie, ul. Jana z Kolna 35, ochroną ubezpieczeniową podczas wyjazdów zagranicznych (jak również na terenie Rzeczypospolitej Polskiej w zakresie NNW i OC) objęci są posiadacze Karty EURO26 World (z wyłączeniem uprawiania amatorsko sportów takich jak: narciarstwo, snowboard, surfing, windsurfing, kitesurfing, wszelkie zajęcia teambuildingowe, sporty wysokiego ryzyka, sporty ekstremalne, wyczynowe uprawianie sportu) w następującym zakresie:

AXA Towarzystwo Ubezpieczeń i Reasekuracji S.A. hereby confirms that based on General Agreement No. 11282/B concluded between AXA Towarzystwo Ubezpieczeń i Reasekuracji S.A. with its registered office in Warsaw, at ul. Chłodna 51 and Youth Projects Managements Sp. z o.o. with its registered office in Sopot, ul. Jana z Kolna 35, holders of EURO26 World Cards are subject to insurance protection during travels abroad in the following scope:

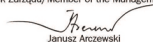
Zakres ubezpieczenia	Suma ubezpieczenia oraz górne limity odpowiedzialności
NNW (następstwa nieszczęśliwych wypadków) - trwały uszczerbek/NNW (accident insurance) - injury	5 000 EUR
NNW (następstwa nieszczęśliwych wypadków) - śmierć/NNW (accident insurance) - death	2 500 EUR
Inwalidztwo na skutek nieszczęśliwego wypadku/Disability due to personal accident	5 000 EUR
Pobyt Ubezpieczonego w szpitalu na skutek NNW/Hospitalisation of the insured due to personal accident	80 PLN do 7 dni/up to 7 days; 160 PLN powyżej 7 dni/over 7 days
Zwrot kosztów nabycia protez i środków pomocniczych/Reimbursement of costs of prostheses and auxiliary materials	2 500 PLN
KL (ubezpieczenie kosztów leczenia wraz z asystancją)/KL (medical payment insurance with assistance)	60 000 EUR
Leczenie ambulatoryjne/Ambulatory treatment	do/up to 2 000 EUR
Transport Ubezpieczonego do placówki medycznej, między placówkami medycznymi/ Transport of the Insured to a medical facility, between medical facilities	do wysokości sumy ubezpieczenia KL/up to the amount of the medical payment insurance
Leczenie stomatologiczne/Dental treatment	do/up to 250 EUR
Naprawa lub zakup protez, okularów/Repair or purchase of prostheses, glasses	do/up to 10% sumy ubezpieczenia KL/up to 10% of the amount of the medical payment insurance
Transport Ubezpieczonego do RP/Transport of the Insured to Poland	do wysokości sumy ubezpieczenia KL/up to the amount of the medical payment insurance
Transport zwłok Ubezpieczonego/Transport of the Insurer's body	do wysokości sumy ubezpieczenia KL/up to the amount of the medical payment insurance
Zakup trumny lub koszty kremacji i zakupu urny/Purchase of a coffin, or costs of cremation and purchase of an urn	do/up to 1 250 EUR
Koszty wyżywienia i zakwaterowania osoby towarzyszącej/Costs of food and accommodation of assisting person	do 100 EUR za dzień, maksymalnie do 7 dni/up to 100 EUR per day, up to the maximum of 7 days
Koszty podróży osoby wezwanej do towarzyszenia/Costs of travel of person summoned for assistance	do/up to 1 000 EUR
Koszty transportu Ubezpieczonego w celu kontynuacji podróży/Costs of transport of the Insured to continue travel	do/up to 500 EUR
OC w życiu prywatnym/Civil liability in private life	20 000 EUR

Pełna treść warunków ubezpieczenia posiadaczy Kart EURO26 znajduje się na www.euro26.pl.

Prezes Zarządu/Chairman of the Management Board


Maciej Szwarz

Członek Zarządu/Member of the Management Board


Janusz Arczewski

AXA Towarzystwo Ubezpieczeń i Reasekuracji S.A., ul. Chłodna 51, 00-867 Warszawa, tel 22 555 00 00, fax 22 555 05 00, www.axa.pl
Organ rejestrowy: Sąd Rejonowy dla m.st. Warszawy, XII Wydział Gospodarczy KRS, Nr KRS 38616, NIP 521-10-36-865, Kapitał zakładowy 73 811 500 zł - wpłacony w całości



Insurance

certificate

of holder of Euro 26 Sport Card

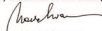
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Zakres ubezpieczenia	Suma ubezpieczenia oraz górne limity odpowiedzialności
NNW (następstwa nieszczęśliwych wypadków) - trwały uszczerbek/NNW (accident insurance) - injury	5 000 EUR
NNW (następstwa nieszczęśliwych wypadków) - śmierć/NNW (accident insurance) - death	2 500 EUR
Inwalidztwo na skutek nieszczęśliwego wypadku/Disability due to personal accident	5 000 EUR
Pobyt Ubezpieczonego w szpitalu na skutek NNW/Hospitalisation of the insured due to personal accident	80 PLN do 7 dni/up to 7 days; 160 PLN powyżej 7 dni/over 7 days
Zwrot kosztów nabycia protez i środków pomocniczych/Reimbursement of costs of prostheses and auxiliary materials	2 500 PLN
KL (ubezpieczenie kosztów leczenia wraz z asystancją)/KL (medical payment insurance with assistance)	60 000 EUR
Leczenie ambulatoryjne/Ambulatory treatment	do/up to 2 000 EUR
Transport Ubezpieczonego do placówki medycznej, między placówkami medycznymi/Transport of the Insured to a medical facility, between medical facilities	do wysokości sumy ubezpieczenia KL/up to the amount of the medical payment insurance
Leczenie stomatologiczne/Dental treatment	do/up to 250 EUR
Naprawa lub zakup protez, okularów/Repair or purchase of prostheses, glasses	do 10% sumy ubezpieczenia KL/up to 10% of the amount of the medical payment insurance
Transport Ubezpieczonego do RP/Transport of the Insured to Poland	do wysokości sumy ubezpieczenia KL/up to the amount of the medical payment insurance
Transport zwłok Ubezpieczonego/Transport of the Insurer's body	do wysokości sumy ubezpieczenia KL/up to the amount of the medical payment insurance
Zakup trumny lub koszty kremacji i zakupu urny/Purchase of a coffin, or costs of cremation and purchase of an urn	do/up to 1 250 EUR
Koszty wyżywienia i zakwaterowania osoby towarzyszącej/Costs of food and accommodation of assisting person	do 100 EUR za dzień, maksymalnie do 7 dni/up to 100 EUR per day, up to the maximum of 7 days
Koszty podróży osoby wezwanej do towarzyszenia/Costs of travel of person summoned for assistance	do/up to 1 000 EUR
Koszty transportu Ubezpieczonego w celu kontynuacji podróży/Costs of transport of the Insured to continue travel	do/up to 500 EUR
OC w życiu prywatnym/Civil liability in private life	20 000 EUR
OC związane z uprawianiem sportów/Civil liability related to practicing sports	5 000 EUR
KR (ubezpieczenie kosztów ratownictwa)/KR (rescue costs insurance)	5 000 EUR

Pełna treść warunków ubezpieczenia posiadaczy Kart EURO26 znajduje się na www.euro26.pl.

Prezes Zarządu/Chairman of the Management Board


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