

The General terms and conditions and the following terms and conditions all apply to this section.

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**Special definitions  
for this section**

<b>Accidental bodily injury</b>	An identifiable physical injury which is caused by a sudden, unexpected, specific event occurring at an identifiable time and place during both the <b>period of insurance</b> and the <b>operative time</b> and which results in the <b>insured person's</b> death or <b>disablement</b> within 24 calendar months of the date of the event.
<b>Broken bone</b>	A break in the structure of the bone requiring treatment by plaster cast.
<b>Dental injury</b>	Damage to teeth or any dental prostheses caused by an unforeseen and unexpected direct extra-oral impact occurring at an identifiable time and place during both the <b>period of insurance</b> and the <b>operative time</b> .
<b>Dental treatment expenses</b>	The reasonable cost of treatment by a suitably licensed and qualified dentist to repair <b>dental injury</b> .
<b>Disablement</b>	<b>Broken bone, loss of sight, loss of hearing, loss of limb, loss of speech, permanent total disablement.</b>
<b>Inception</b>	Start date of the <b>period of insurance</b> as shown in the schedule.
<b>Insured person</b>	As described in the schedule, provided that they are: a. over 14 years old and under 70 years old at <b>inception</b> ; and b. legally resident in the United Kingdom of Great Britain and Northern Ireland, the Channel Islands, the Isle of Man or the Republic of Ireland.
<b>Loss of sight</b>	Permanent and total loss of sight in an eye.
<b>Loss of hearing</b>	Permanent and total loss of hearing in an ear.
<b>Loss of limb</b>	Loss by physical separation of an arm or hand at or above the wrist, or of a foot or leg at or above the ankle, or permanent and total loss of use of a complete arm, hand, foot or leg.
<b>Loss of speech</b>	Permanent and total loss of speech.
<b>Medical expenses</b>	The cost of medical, surgical or other remedial attention or treatment given or prescribed by a suitably qualified medical practitioner and all hospital, nursing home and ambulance charges incurred with <b>our</b> prior consent in connection with a valid claim under this section.
<b>Operative time</b>	The time when the <b>insured person</b> is covered under this section as shown in the schedule.
<b>Permanent total disablement</b>	<b>Disablement</b> which entirely prevents the <b>insured person</b> from attending to any business or occupation for which the <b>insured person</b> is reasonably suited by training, education or experience and which lasts continuously for 12 calendar months and which at the end of that period is without prospect of improvement.
<b>Spectacles expenses</b>	The reasonable cost of repair or replacement of spectacles following loss or damage to spectacles caused by an unforeseen and unexpected impact to the spectacles occurring at an identifiable time and place during both the <b>period of insurance</b> and the <b>operative time</b> .
<b>You/your</b>	The insured association shown in the schedule.

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**What is covered**

We will pay the benefit shown in the schedule if an **insured person** suffers **accidental bodily injury**.

We will also pay:

- a. **medical expenses** incurred by the **insured person**;
- b. **dental treatment expenses** incurred by the **insured person**;
- c. **spectacles expenses** incurred by the **insured person**;

in connection with **accidental bodily injury**.

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**What is not covered**

We will not make any payment under this section:

## Hazardous pursuits

1. due to **accidental bodily injury** sustained while taking part in:
  - a. the following winter sports: free-style skiing, ski jumping, ice hockey, use of bobsleighs or skeletons, repetitive travel in ski run helicopters or any competition. Off-piste skiing is only covered if the **insured person** is accompanied by a suitably experienced guide;
  - b. the following scuba-diving activities: any unaccompanied dive, any dive involving visits to wrecks or caves, any dive for gain or reward, or any dive below 30 metres. Any other scuba-diving activities are only covered if the **insured person**:
    - i. holds the British Sub Aqua Club 'Sports Diver' certificate or the Professional Association of Diving Instructors 'Open Water' certificate and follows the relevant club or association rules and guidelines at all times; or
    - ii. dives under the constant supervision of a properly licensed diving school and follows their rules and instructions at all times;
  - c. potholing, caving, hang-gliding, parachuting, parascending, paragliding, mountaineering, coastering or rock-climbing for which the **insured person** would normally need to use ropes or guides, bungee jumping, white-water rafting or any other activity with a similar increased risk of physical injury;
  - d. armed forces activities including operations, exercises or training;
  - e. flying as a pilot or aircrew or any other aerial activities other than travel by commercial airlines as a passenger.

## Other exclusions

2. due to **accidental bodily injury** directly or indirectly arising out of or contributed to by:
  - a. the **insured person** undertaking any activity against medical advice;
  - b. the **insured person** taking or using drugs or controlled substances (other than drugs prescribed by their medical practitioner and used properly);
  - c. the **insured person** committing or attempting suicide or deliberately injuring themselves;
  - d. the **insured person** deliberately exposing themselves to exceptional danger unless trying to save a human life;
  - e. any criminal act by the **insured person**;
  - f. any physical defect, infirmity or medical condition known to the **insured person** at **inception**, unless the defect, infirmity or condition has been without the need of any medical advice or treatment during the 24 months before **inception**;
  - g. **war, terrorism or nuclear risks**.

## Dental treatment expenses

3. for the treatment of a **dental injury**:
  - a. caused by the consumption of food and drink;
  - b. caused by any oral hygiene activity;
  - c. for which the **insured person** has not sought treatment from a qualified medical practitioner or suitably licensed and qualified dentist within 21 days of the incident; or
  - d. caused by damage to dental prostheses while the **insured person** is not wearing them.

Spectacles expenses	4. for loss or damage to: <ol style="list-style-type: none"> <li>contact lenses; or</li> <li>spectacles which are more specifically insured under another insurance policy.</li> </ol>
Broken bones	5. for hairline fractures of the: <ol style="list-style-type: none"> <li>leg or foot, including the femur, tibia, fibula, tarsal, metatarsal or patella; or</li> <li>arm, including the humerus, radius, ulna or carpals.</li> </ol>
Permanent total disablement	6. for <b>permanent total disablement</b> suffered by an <b>insured person</b> aged 65 or older at <b>inception</b> .

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## How much we will pay

Payment of benefit	<p><b>We will pay you</b> the benefit shown in the schedule for <b>accidental bodily injury</b> to each <b>insured person</b>. Only one benefit shall be payable for each <b>insured person</b> in respect of the consequences of any one <b>accidental bodily injury</b>.</p> <p>For <b>permanent total disablement</b>, <b>we</b> will pay only when the disablement has lasted continuously for 12 calendar months and at the end of that time is without prospect of improvement.</p>
Total event limit	The most <b>we</b> will pay in total for all benefits and expenses in respect of all <b>insured persons</b> injured in any one event is the total event limit shown in the schedule.

### Additional cover

Medical expenses	<b>We will also pay medical expenses</b> incurred in connection with an <b>accidental bodily injury</b> up to the amount shown in the schedule for each <b>insured person</b> .
Dental treatment expenses	<b>We will also pay dental treatment expenses</b> incurred in connection with an <b>accidental bodily injury</b> up to the amount shown in the schedule for each <b>insured person</b> .
Spectacles expenses	<b>We will also pay spectacles expenses</b> incurred in connection with an <b>accidental bodily injury</b> up to the amount shown in the schedule for each <b>insured person</b> .

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## Your obligations

**We** will not make any payment under this section unless:

- you** notify **us** promptly of any injury which might be covered under this section. **You** should also notify Perkins Slade Insurance Brokers Limited.
- the **insured person** sees a suitably qualified medical practitioner or suitably licenced and qualified dentist as soon as possible after suffering injury and follows any medical or dental advice they are given.

If **we** consider it necessary, the **insured person** must allow a medical adviser chosen by **us** to examine them and to see all medical records.