SCHEDULE

Policy Number 1937165



INSURANCE DETAILS

Period of insurance: Continuous cover from 1st October 2022 until the policy is cancelled

Date issued to insured: [22nd September 2022]

Underwritten by: Hiscox Underwriting Ltd on behalf of the insurers listed for each section of the policy

Payment method: Payment by Broker's Account

INSURED DETAILS

Insured: Standard members of Equity

Address : Equity,

Guild House

Upper St Martin's Lane,

London WC2H 9EG

Artist description : Standard member of Equity

General terms and 12135 WD-HSP-UK-HEQ-Standard GTC-(5)

conditions wording: The General terms and conditions apply to this policy in conjunction with the specific

wording detailed in each section below







Hencilla Equity scheme

PERSONAL ACCIDENT

Section wording 12137 WD-HSP-UK-HEQ-Standard PA-(5) Insurer

Hiscox Insurance Company Limited

Personal accident

Insured persons Standard members of Equity

Special limits (included within and not in addition to the overall limit above)

Death £20,000 capital benefit amount per standard member of Equity £20,000 capital benefit amount per standard member of Equity Loss of one or more limbs Loss of one or both eyes £20,000 capital benefit amount per standard member of Equity Permanent total disablement £20,000 capital benefit amount per standard member of Equity

Temporary total disablement £150 per week up to a maximum of 52 weeks – excluding the first 2 weeks Accumulation per conveyance £5,000,000 any one loss in the aggregate

Disfigurement Up to £5,000 per individual standard member Hospital benefit £50 per day up to a maximum of 52 weeks

Medical expenses 25% of the benefits paid whichever up to a maximum of £6,625 per individual standard

member

Coma benefit £50 per day up to a maximum of 52 weeks

Disability assistance Up to a maximum of £20,000 per standard member of Equity Funeral benefit Up to a maximum of £10,000 per standard member of Equity **Dental benefit** Up to a maximum of £500 per standard member of Equity Optical benefit Up to a maximum of £500 per standard member of Equity

Endorsements

6752.0 Amendment of cover: cyber claims and losses The General Terms of this policy and the terms, conditions and exclusions of the relevant sections all apply to this endorsement except as modified below:

Endorsements- applicable to the whole policy

Clause

Data Protection Act

By accepting your policy, you consent to us and the Hiscox group of companies (collectively referred to as Hiscox) using the information we may hold about you or others related to your policy for the purposes of providing insurance and handling claims, if any, and to process sensitive personal information about vou or others related to your policy where this is necessary (for example health information or criminal convictions). This may mean Hiscox has to give some details to third parties involved in providing insurance cover. These may include insurance carriers. third-party claims adjusters, fraud detection and prevention services, third party service providers, reinsurance companies, insurer tracing offices and insurance regulatory authorities. Where such sensitive personal information relates to anyone other than you, you must obtain the explicit consent of the person to whom the information relates both to the disclosure of such information to us and its use by Hiscox as set out above. The information provided will be treated in confidence and in compliance with all relevant regulation and legislation. You or others related to your policy may have the right to apply for a copy of this information (for which Hiscox may charge a small fee) and to have any inaccuracies corrected.

For training and quality control purposes, telephone calls may be monitored or recorded.

Clause 6752.0

Amendment of cover: cyber claims and losses

The following are added to **Special definitions for this section**:

Computer or digital technology

Any **programs**, computer network, hardware, software, operational technology, internet-connected device, network-connected device, electronic device, information technology, communications system, including but not limited to any internet-of-things devices, email system, intranet, extranet, website or cloud computing services.

Computer or digital technology error

Any negligent act, error or omission by anyone in the:

- 1. creation, handling, entry, modification or maintenance of; or
- 2. on-going operation, maintenance (including but not limited to installation, upgrading or patching) or development of,

any computer or digital technology.

Cyber attack

Any digital attack or interference, whether by a hacker or otherwise, designed to:

- gain access to;
- extract information from;
- 3. disrupt access to or the operation of; or
- 4. cause damage to,

any data or computer or digital technology, including but not limited to any:

- a. programs designed to damage, disrupt, extract data from, or gain access to any data or computer or digital technology including, but not limited to, malware, wipers, worms, trojans, rootkits, spyware, dishonest adware, crimeware, ransomware, crypto-jacking and other malicious software or viruses; or
- b. denial of service attack or distributed denial of service attack.

Hacker

Anyone, including an employee of **yours**, who gains unauthorised access to or unauthorised use of any:

- 1. computer or digital technology; or
- 2. data held electronically by you or on your behalf.

The following is added to What is not covered:

Cyber incidents

We will not make any payment for any claim or part of a claim or loss directly or indirectly due to or contributed to by, resulting from or in connection with any:

- a. cyber attack;
- b. hacker;
- c. computer or digital technology error;
- d. fear or threat of a. to b. above; or
- e. any action taken in controlling, preventing, supressing, responding or in any way relating to a. to d. above.

Mental anguish and distress

We will not make any payment for any injury or illness resulting from mental anguish or distress.

INFORMATION ABOUT US

This policy is underwritten by Hiscox Underwriting Limited on behalf of the insurers listed below.

Name Hiscox Underwriting Limited

Registered address 22 Bishopsgate

London EC2N 4BQ United Kingdom

Company registration Registered in England number 02372789

Status Authorised and regulated by the Financial Conduct Authority

Insurers

These insurers provide cover as specified in each section of the schedule.

Name Hiscox Insurance Company Limited

Registered address 22 Bishopsgate

London EC2N 4BQ United Kingdom

Company registration Registered in England number 00070234

Status Authorised by the Prudential Regulation Authority and regulated by the Financial Conduct

Authority and Prudential Regulation Authority



Equity standard members insurance portfolio

Policy wording

A seamless integrated insurance solution for Equity standard members.

Please read this wording, together with any **endorsements** and the schedule, very carefully. If anything is not correct, please notify **us** immediately.

This wording is fully protected by the laws of copyright. No unauthorised use or reproduction is permitted.

Our promise to you

In return for the premium **you** have paid, **we** agree to insure **you** in accordance with the terms and conditions of the **policy**.

Steve Langan

CEO, Hiscox Insurance Company

Complaints procedure

Hiscox aims to ensure that all aspects of **your** insurance are dealt with promptly, efficiently and fairly. At all times Hiscox are committed to providing **you** with the highest standard of service. If **you** have any concerns about **your policy** or **you** are dissatisfied about the handling of a claim and wish to complain **you** should, in the first instance, contact Hiscox Customer Relations in writing at:

Hiscox Customer Relations The Hiscox Building Peasholme Green York YO1 7PR

or by telephone on +44 (0) 800 1164627 or +44 (0) 1904 681198 or by email at customer.relations@hiscox.com.

Where **you** are not satisfied with the final response from Hiscox, **you** also have the right to refer **your** complaint to the Financial Ombudsman Service. For more information regarding the scope of the Financial Ombudsman Service, please refer to www.financial-ombudsman.org.uk.



General definitions

Words shown in **bold** type have the same meaning wherever they appear in this **policy**.

The words defined below are used throughout this **policy**. Any other definitions are shown in the section to which they apply.

Artist

Any individual person or their personal service limited company where that person is the sole director and employee who:

- a. exercises professional skill in the provision of entertainment; or
- b. is a face or body painter including the use of glitter and temporary tattoos that can be removed the same day by soap and water; or
- exercises professional skill in carrying out their duty of stage manager, choreographer, theatre designer or theatre director in the provision of entertainment and corporate events; or
- d. is a teacher or voice coach engaged in the teaching of performing arts; or
- e. exercises professional skill in modeling; or
- exercises performance related skill in the provision of role playing, commentary, presentation and voice over to the commercial sector.

Asbestos risks

- a. The mining, processing, manufacturing, use, testing, ownership, sale or removal of asbestos, asbestos fibres or material containing asbestos; or
- b. exposure to asbestos, asbestos fibres or materials containing asbestos; or
- c. the provision of instructions, recommendations, notices, warnings, supervision or advice given, or which should have been given, in connection with asbestos, asbestos fibres or structures or materials containing asbestos.

Confiscation

Confiscation, nationalisation, requisition, expropriation, deprivation, destruction of or damage to property by or under the order of any government or public or local authority.

Date recognition

Any failure by any equipment (including any hardware or software) to correctly recognise any given date or to process any data or to operate properly due to any failure to correctly recognise any given date.

Endorsement

A change to the terms of the **policy**.

Excess

The amount **you** must bear as the first part of each agreed claim or loss.

Geographical limits

The geographical area shown in the schedule.

Nuclear risks

- a. Any sort of nuclear material, nuclear reaction, nuclear radiation or radioactive contamination;
- b. any products or services which include, involve or relate in any way to anything in a. above, or the storage, handling or disposal of anything in a. above;
- all operations carried out on any site or premises on which anything in a. or b. above is located.

Period of insurance

The time for which this **policy** is in force as shown in the schedule.

Policy

This insurance document and the schedule, including any **endorsements**.

Program

A set of instructions written in a computer language which tells a computer how to process data or interact with ancillary equipment.

Standard member

A member of Equity who is in benefit in accordance with the rules of Equity who is not a **student member** or retired member and who is a:

- a. permanent resident of England, Scotland, Wales, Northern Ireland, the Isle of Man, the Channel Islands or Gibraltar; or
- resident overseas visiting the United Kingdom, the Isle of Man, the Channel Islands or Gibraltar.



Student member

An Equity student who participates in self-produced productions, rehearsals, profit share performances and occasional professional performances.

Stunt performer

A **standard member** who is not a circus or variety performer and who is engaged to undertake **stunt performing activities** within film, television production or live events.

Stunt performing activities

Any hazardous activity performed as a stunt including but not restricted to martial arts, boxing, fighting, wrestling, trampolining, gymnastics, acrobatics, aerial activities including flying, parachuting, paragliding, driving or riding any mechanical vehicle, horse riding, rock climbing, swimming, sub aqua activities and any activity involving the use of fire.

Terrorism

An act, or the threat of an act, by any person or group of persons, whether acting alone or on behalf of or in connection with any organisation or government, that:

- a. is committed for political, religious, ideological or similar purposes; and
- b. is intended to influence any government or to put the public, or any section of the public, in fear; and
- c. i. involves violence against one or more persons; or
 - ii. involves damage to property; or
 - iii. endangers life other than that of the person committing the action; or
 - iv. creates a risk to health or safety of the public or a section of the public; or
 - v. is designed to interfere with or to disrupt an electronic system.

Virus

Programs that are secretly introduced without **your** permission or knowledge including, but not limited to, malware, worms, trojans, rootkits, spyware, dishonest adware, crimeware and other malicious unwanted software.

War

War, invasion, act of foreign enemies, hostilities (whether war be declared or not), civil war, rebellion, revolution, insurrection, military or usurped power.

We/us/our

The insurers named in the schedule.

You/your

The **standard members** shown in the schedule.

General conditions

The following conditions apply to the whole of this **policy**. Any other conditions are shown in the section to which they apply.

Presentation of the risk

In agreeing to insure you and in setting the terms and premium, we have relied on the information you have given us. You must provide a fair presentation of the risk and must take care when answering any questions we ask by ensuring that all information provided is accurate and complete. A fair presentation is one which clearly discloses in a reasonably clear and accessible manner all material facts which you (including your senior management and those responsible for arranging this insurance) know or ought to know following a reasonable search.

We will consider that **you** have complied with the obligation to provide a fair presentation of the risk if:

- a. you are a member of Equity and you did not provide any untrue, inaccurate or incomplete information to Equity, which if provided would have resulted in you being declined for membership; and
- b. all responses provided by **you** to the questions asked by **us** or on **our** behalf before we agreed to insure **you** were true, accurate and complete.

If you fail to make a fair presentation

- a. If we establish that you deliberately or recklessly failed to present the risk to
 us fairly, we may treat this policy as if it never existed and refuse to make any
 payment under it. You must reimburse all payments already made by us and
 we will be entitled to retain all premiums paid.
 - b. If we establish that you failed to present the risk to us fairly but that your failure was not deliberate or reckless, the remedy we will have available to us will depend upon what we would have done had you made a fair presentation of the risk, as follows:



- i. if **we** would not have provided this **policy**, **we** may treat it as if it never existed and refuse to make any payment under it. **You** must reimburse all payments already made by **us**. **We** will refund any premiums **you** have paid; or
- ii. if we would have provided this policy on different terms (other than as to premium), we will treat it as if it had been provided on such different terms from the start of the period of insurance. This may result in us making no payment for a particular claim or loss. You must reimburse any payment made by us that we would not have paid if such terms had been in effect.

Change of circumstances

You must tell us as soon as reasonably possible if any of the responses provided by you to the questions asked by us or on our behalf before we agreed to insure you are no longer true, accurate and complete. We may then change the terms and conditions of this policy or cancel it in accordance with the Cancellation condition.

If you fail to notify us of a change of circumstances

- 4. a. If **we** establish that **you** deliberately or recklessly failed to:
 - notify **us** of a change of circumstances which may materially affect the **policy**; or
 - ii. comply with the obligation in 1. above to make a fair presentation of the risk to **us** when providing us with information in relation to a change of circumstances;

we may treat this **policy** as if it no longer existed from the date of such change of circumstances and refuse to make any payment under it in respect of any claim made or any loss occurring after that date. **You** must reimburse all payments already made by **us** relating to claims made or losses occurring after such date. **We** will be entitled to retain all premiums paid.

- b. If **we** establish that **you** failed to notify **us** of a change of circumstances or to make a fair presentation of the risk to **us** when providing **us** with information in relation to a change of circumstances, but that **your** failure was not deliberate or reckless, the remedy **we** will have available to **us** will depend upon what **we** would have done had **you** fairly presented the change of circumstances to **us**, as follows:
 - i. if we would have cancelled this policy, we may treat it as cancelled from the date that such cancellation would have been effective and refuse to make any payment under it in respect of any claim made or any incident occurring after that date. You must reimburse any payments already made by us relating to claims made or losses occurring after such date. We will refund any premiums you have paid in respect of any period after the date when cancellation would have been effective: or
 - ii. if we would have provided this policy on different terms (other than as to premium), we will treat it as if it had been provided on such different terms from the date when your circumstances changed. This may result in us making no payment for a particular claim or loss.

Reasonable precautions

You must take reasonable steps to prevent accident or injury and to protect your property against loss or damage. You must keep any property insured under this policy in good condition and repair. We will not make any payment under this policy in respect of any incident occurring whilst you are not in compliance with this condition unless you can demonstrate that such non-compliance could not have increased the risk of the loss, damage, accident or injury occurring in the circumstances in which it occurred.

In benefit

- 6. **We** will not make any payment under this **policy** unless **you**:
 - a. have been accepted into membership of Equity and are no more than 13 weeks in arrears with Equity for their subscription levies, dues, loans or fines; or
 - b. have applied for membership of Equity and **your** application is pending at the time of the incident giving rise to a claim, subject to the following;
 - i. you are eligible for membership of Equity; and
 - ii. you have submitted an Equity application form; and
 - iii. you have paid the entrance fee and subscription to Equity.

Premium payment

7. **We** will not make any payment under this **policy** until **you** have paid the premium.



Cancellation

8. You or we can cancel the **policy** by giving 30 days' written notice. We will give you a pro-rata refund of the premium for the remaining portion of the **period of insurance** after the effective date of cancellation for which you have already paid. However, we will not refund any premium under £20.

If we have agreed that you can pay us the premium by instalments and we have not received an instalment 14 days after the due date, we may cancel the policy. In this event, the period of insurance will equate to the period for which premium instalments have been paid to us. We will confirm the cancellation and amended period of insurance to you in writing.

Multiple insureds

9. The most **we** will pay is the relevant amount shown in the schedule.

If more than one insured is named in the schedule, the total amount **we** will pay will not exceed the amount **we** would be liable to pay to any one of **you**.

You agree that the insured named in the schedule, or if there is more than one insured named in the schedule the first of them, is authorised to receive all notices and agree any amendments to the **policy**.

Aggregate limit

10. Where this **policy** specifies an aggregate limit, this means **our** maximum payment for all relevant claims or losses covered under the **policy** during the **period of insurance**.

If the **period of insurance** is continuous, the aggregate limit will apply to all relevant claims or losses covered under the **policy** during the 12 months from the date the continuous cover starts. Each aggregate limit will be reinstated to the level shown in the schedule at each anniversary.

Rights of third parties

11. You and we are the only parties to this policy. Nothing in this policy is intended to give any person any right to enforce any term of this policy which that person would not have had but for the Contracts (Rights of Third Parties) Act 1999.

Other insurance

12. We will not make any payment under this policy where you would be entitled to be paid under any other insurance if this policy did not exist except in respect of any amount in excess of the amount that would have been payable under such other insurance had this policy not been effected. If such other insurance is provided by us the most we will pay under this policy will be reduced by the amount payable under such other insurance.

Cover under multiple sections

3. Where you, including anyone within the meaning of 'you' or 'insured person' in any section of the policy, are entitled to cover under more than one section of the policy in respect of the same claim or loss, or any part of a claim or loss, we shall only provide cover under one section of the policy, being the section that provides the most advantageous cover to you or the party entitled to cover.

Governing law

 Unless some other law is agreed in writing, this policy will be governed by the laws of England.

Arbitration

15. Any dispute arising out of or relating to this insurance, including over its construction, application and validity, will be referred to a single arbitrator in accordance with the Arbitration Act then in force.

General claims conditions

The following claims conditions apply to the whole of this **policy**. Any other claims conditions and procedures are shown in the section to which they apply.

Your obligations

- 1. **We** will not make any payment under this **policy** unless **you**:
 - a. give **us** prompt notice of anything which is likely to give rise to a claim under this **policy**, in accordance with the terms of each section; and
 - give us, at your expense, any information which we may reasonably require and cooperate fully in the investigation of any claim under this policy.
- 2. You must:
 - make every reasonable effort to minimise any loss, damage or liability and take appropriate emergency measures immediately if they are required to reduce any claim; and



b. give **us** all assistance which **we** may reasonably require to pursue recovery of amounts **we** may become liable to pay under this **policy**, in **your** name but at **our** expense.

If **you** fail to do so, **you** shall be liable to **us** for an amount equal to the detriment **we** have suffered as a result of **your** failure to comply with this obligation, which **we** may deduct from any payment **we** make under this **policy**.

Fraud

- 3. If you or anyone entitled to cover in respect of any claim or loss, or anyone on behalf of you or such other person, tries to deceive us by deliberately giving us false information or making a fraudulent claim under this policy then:
 - we shall be entitled to give you notice of termination of the policy with effect from the date of any fraudulent act or claim or the provision of such false information;
 - we shall be entitled to refuse to make any payment under the policy in respect of any claim made or any loss occurring after the date of any fraudulent act or claim or the provision of such false information;
 - you must reimburse all payments already made by us relating to claims made or losses occurring after the date of any fraudulent act or claim or the provision of such false information; and
 - d. we shall be entitled to retain all premiums paid,

This does not affect **your** rights in relation to any claim made or loss occurring before the date of any fraudulent act or claim or the provision of such false information.

4. Where this **policy** provides cover for any individual who, or entity that, is not a party to the **policy**, and where such an individual or entity (or anyone on their behalf) tries to deceive **us** by deliberately giving **us** false information or making a fraudulent claim under this **policy**, **our** rights set out in 3. above apply only to any individual or entity that gave the false information or made the fraudulent claim.



Policy wording

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

Special definitions for this section

Accidental bodily injury An identifiable physical injury, including illness solely and directly resulting from the injury,

which is caused by an accident occurring at an identifiable time and place during the **operative time** and which results in **your** death, **disablement** or **disfigurement** within 24

calendar-months of the date of the accident.

Dancer and physical artist

A standard member who has registered and paid for the performers' accident MRI/RIB cover.

Disablement

Loss of sight, loss of limb, permanent total disablement or temporary total disablement.

Disfigurement A permanent facial disfigurement more than 20mm long which is ordinarily visible for a period

beyond 12 months following the date of the accident in the area forward of the ears from the hairline down to and including the lower jaw. In the event of any dispute arising **you** and **us** shall each appoint a separate medical consultant with a third jointly-appointed consultant as

arbitrator whose decision will be final.

Enhanced member A standard member other than a stunt performer, over 18 years and under 75 yrs, who has

written evidence of either, a) employment as an **artist** within the past eight weeks or b) future employment as an **artist** within the next eight weeks, who has registered for the 24 hour cover

and paid the £5 annual premium.

Hand model A model who has registered with Equity as a hand model.

Inception Start date of the **period of insurance** as shown in the schedule.

Loss of sight Permanent and total loss of sight in an eye.

Loss of limb Loss by physical separation of an arm, hand, foot or leg at or above the wrist or at or above

the ankle, or permanent and total loss of use of a complete arm, hand, foot or leg.

Medical expenses 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

connected with a valid claim under this section.

Model Any standard member whose activities as an artist include modelling.

Operative time The time during the period of insurance when you are covered under this section as shown

below:

Standard member Whilst performing as an artist or where you are

rehearsing, practising, auditioning or training in connection with a contract of employment and travelling to and from the location of the above

Enhanced member At any time

Dancer and physical artist Whilst performing as an artist or where you are

rehearsing, practising, auditioning or training in connection with a contract of employment

Model At any time.

Permanent total disablement

Disablement which totally prevents **you** from working as an **artist**, which lasts continuously for 12 calendar-months and which at the end of that period is without prospect of improvement.

Temporary total disablement

Disablement which totally prevents you from carrying out all parts of your occupation as an

artist.



Policy wording

What is covered

We will pay **you** or the beneficiary of **your policy** the appropriate benefit shown in the schedule if:

- a. you, suffer accidental bodily injury;
- b. you incur medical expenses in connection with accidental bodily injury.

Additional cover

Coma benefit

If **you** suffer **accidental bodily injury** which within 90 days is the sole and independent cause of **you** being in a continuous unconscious state then **we** will pay £50 for each full 24-hour period up to a maximum of 52 weeks while **you** remain in a continuous unconscious state.

Dental treatment

If **you** suffer loss or damage to **your** teeth or any dental prostheses which is caused by an unforeseen and unexpected incident by means of direct extra-oral impact occurring at an identifiable time and place during the **operative time**, **we** will pay **you** the necessary and reasonable cost of treatment by a suitably licensed and qualified dentist. However, **we** will not make any payment for:

- a. the treatment of a dental injury caused by the consumption of food and drink;
- b. the treatment of a dental injury caused by **you** participating in any sport;
- c. the treatment of a dental injury caused by any oral hygiene activity;
- d. the treatment of a dental injury for which you have not sought treatment within seven days of the incident;
- e. treatment of a dental injury caused by damage to dental prostheses while **you** are not wearing them.

Disability assistance

The necessary and reasonable costs incurred with **our** prior consent to make alterations to **your** main home or car as a direct and necessary result of **permanent total disablement** if during the **operative time you** suffer an **accidental bodily injury** which within 24 months of the date of the accident is the sole and independent cause of **permanent total disablement** and for which a payment has been made as a result of **loss of sight**, **loss of limb** or **permanent total disablement**.

Funeral expenses

The necessary and reasonable costs incurred with **our** prior consent for funeral expenses if during the **operative time you** suffer **accidental bodily injury** which within 24 months of the date of the accident is the sole and independent cause of **your** death.

In-patient benefit

If you suffer an accidental bodily injury which on the recommendation of a medical practitioner results in hospital admission then we will pay £50 for each full 24-hour period up to a maximum of 52 weeks while you remain a hospital in-patient as a direct result of the accidental bodily injury.

Optical treatment

If you suffer loss or damage to your eyes which is caused by an unforeseen and unexpected incident by means of direct extra-optical impact occurring at an identifiable time and place during the operative time, we will pay you the necessary and reasonable cost of treatment by a suitably licensed and qualified optician or ophthalmologist. However, we will not make any payment for:

- a. the treatment of an optical injury caused by the insertion or removal of **your** contact lenses;
- b. the treatment of an optical injury caused by **you** participating in any sport;
- the treatment of an optical injury directly or indirectly arising out of or contributed to by you having previously undergone laser eye surgery;
- the treatment of an optical injury for which you have not sought treatment within seven days of the incident.

Additional cover

Dancer and physical artists

Performers' accident MRI/RIB cover

The necessary and reasonable costs incurred by a **dancer and physical artist** for the cost of a magnetic resonance imaging scan or a radio isotope bone scan and associated **medical expenses** if while performing or rehearsing the **dancer and physical artist** suffers **accidental bodily injury** which within 24 calendar-months is the sole and independent cause for the scan to be required.



Policy wording

Additional cover Models

Hand disfigurement

An identifiable physical injury occurring during the **operative time** to the hand of a **hand model** resulting in a permanent hand disfigurement more than 20mm long which is ordinarily visible for a period beyond 12 months following the date of the accident. In the event of any dispute arising the **hand model** and **us** shall each appoint a separate medical consultant with a third jointly-appointed consultant as arbitrator whose decision will be final.

What is not covered

We will not make any payment for **disablement**, **disfigurement**, hand disfigurement, coma benefit, dental treatment, disability assistance, performers' accident MRI/RIB cover, funeral expenses, **medical expenses**, in-patient benefit or optical treatment for:

Stunt performers

1. stunt performers.

Hazardous pursuits

- 2. any injury sustained while taking part in:
 - any aerial activity including but not limited to hang-gliding, parachuting, parascending, paragliding, kite surfing or bungee jumping but this clause does not apply to acrobatics;
 - b. armed forces activities including operations, exercises or training other than as a volunteer or reserve.
- 3. any injury sustained while taking part in any of the following unless the activity was undertaken as an **artist**:
 - mountaineering or rock-climbing for which you would normally need to use ropes or quides;
 - b. any activity taking place underground, including but not limited to caving or potholing;
 - any kind of race or endurance test which is known to carry an increased risk of personal injury;
 - d. any combat sport including but not limited to boxing, wrestling or martial arts;
 - e. flying other than travel by commercial airlines as a passenger.

Other exclusions

- 4. any injury to **you** directly or indirectly arising out of or contributed to by:
 - a. any emotional or psychiatric disorder or condition;
 - you taking or using drugs or controlled substances (other than drugs prescribed by your doctor and used properly);
 - c. **you** committing suicide or attempting to commit suicide:
 - d. any injury you sustain deliberately;
 - e. you being deliberately placed in danger by your actions;
 - f. any criminal act by you;
 - HIV (Human Immune Deficiency Virus), AIDS (Acquired Immune Deficiency Syndrome), AIDS-related complex (ARC) or any related virus or illness, or any sexually-transmitted disease;
 - h. pregnancy or any condition connected with pregnancy or childbirth;
 - any physical or mental defect, infirmity or medical condition known to you 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;
 - j. war, terrorism or nuclear risks;
 - any illness or disease other than illness solely and directly resulting from accidental bodily injury;
 - I. any business or commercial activity other than as an artist;
 - m. you visiting countries or areas against any recommendation or advice issued by the Foreign and Commonwealth Office or the Department of Health prior to your departure unless we give our prior written permission.



Policy wording

Temporary benefits (Standard)

temporary total disablement whilst you are not in paid employment for your activities
as an artist at the time of the accidental bodily injury except where you are
rehearsing, practicing, auditioning or training in connection with a contract of
employment.

Temporary benefits (Enhanced)

- 6. **temporary total disablement** where **you** do not have written evidence of either;
 - a. employment as an artist within the past eight weeks, or
 - b. future employment as an artist within the next eight weeks

How much we will pay

Payment of benefit

We will pay the appropriate benefit shown below, but we will not pay more than one of the disablement benefits in respect of the same accident. However, we will pay for temporary total disablement prior to making any payment under the death or permanent total disablement benefits.

Death and disablement

For death, **permanent total disablement**, **loss of sight** or **loss of limb** other than where **you** are under the age of 18 and in full time education we will pay £20,000.

For death, permanent total disablement, loss of sight, loss of hearing, loss of limb or loss of speech where you are under the age of 18 and in full time education we will pay £2,000.

We will only pay for **permanent total disablement** when it has lasted for 12 calendar-months and at the end of that time is without prospect of improvement.

However, we will pay for temporary total disablement prior to making any payment under the death or permanent total disablement benefit in the sum of £150 per week up to a maximum of 52 weeks.

If you are over 80 years old at inception, the most we will pay under the death or permanent total disablement benefits is £5,000.

For temporary total disablement benefits, we will pay:

- a. when the total amount on termination of any one period of disablement has been agreed; or
- at your request on completion of at least four weeks' disablement subject to satisfactory medical and other evidence that we may require.

We will not pay **temporary total disablement** benefits for more than 52 weeks in connection with one injury.

Disfigurement

We will pay you the following benefit for disfigurement as shown in the scale below:

Scar from 20mm to 25mm in length
Scar from 25mm to 50mm in length
Scar from 50mm to 75mm in length
Scar from 75mm to 100mm in length
Scar exceeding 100mm in length
£1,000 any one incident
£4,000 any one incident
£5,000 any one incident

Where **you** are a **model we** will pay the following benefit following **disfigurement** or hand disfigurement as shown in the scale below:

Scar from 20mm to 25mm in length

Scar from 25mm to 50mm in length

Scar from 50mm to 75mm in length

Scar from 75mm to 100mm in length

Scar exceeding 100mm in length

£2,000 any one incident

£4,000 any one incident

£8,000 any one incident

£10,000 any one incident

Payment of medical expenses

We will also pay medical expenses incurred in connection with the accidental bodily injury up to but not exceeding 25% of the benefit paid, subject to a maximum amount of £6, 950 for you during the period of insurance.



Policy wording

Additional benefits

Dental benefit The most **we** will pay **you** during the **period of insurance** is £500.

Disability assistance benefit The most we will pay you during the period of insurance is £20,000.

Funeral benefit The most we will pay you during the period of insurance is £10,000.

Optical benefit The most **we** will pay **you** during the **period of insurance** is £500.

Performers' accident MRI/ RIB cover The most we will pay you during the period of insurance is £1,000.

Maximum accumulation any one incident

The maximum amount **we** will pay in all under this and any other personal accident insurance issued by **us** in **your** name in respect of any one incident involving more than one **standard member** insured under this **policy** is £5,000,000. If a claim exceeds £5,000,000, **we** will pay an amount under this **policy** which is proportionately reduced so that the total under this and any other **applicable** personal accident insurance does not exceed £5,000,000.

Your obligations

If a problem arises

We will not make any payment under this section unless:

- you notify First Act Insurance promptly of any injury or illness which might be covered under this section;
- 2. **you** see a suitably qualified medical practitioner as soon as possible after suffering injury and follow any medical advice **you** are given.

If we consider it necessary, you must allow a medical adviser chosen by us to examine you and to see all of your medical records.

Claims

Procedural conditions for claims

- Written notice must be given to First Act Insurance as soon as practicable of any accident which causes or may cause a claim to be made under this insurance. If disablement, disfigurement or hand disfigurement results or may result, you must be placed under the care of a suitably qualified medical practitioner as early as possible.
- 2. First Act Insurance, Simpson House, 6 Cherry Orchard Road, Croydon CR9 6AZ.

Tel: 0208 686 5050

Email: mail@hencilla.co.uk

If these conditions are not complied with, **we** may reduce any payment **we** make under this section by an amount equal to the detriment **we** have suffered as a result.