Artists, Assemblers, Technicians, Riggers

EN PISTE, NATIONAL CIRCUS ARTS ALLIANCE SUMMARY OF INSURANCE COVERAGE

Policy No. 100011515 issued by iA Special Markets, a division of Industrial Alliance Insurance and Financial Services Inc.

GROUP ACCIDENT INSURANCE

You are covered for a principal sum of \$50,000, if an injury is sustained as the result of an accident while performing the normal and regular duties of your occupation including during tours, rehearsals and practices, during the course of your association with En Piste, National Circus Arts Alliance, while under its direction and control.

ACCIDENTAL DEATH, DISMEMBERMENT AND SPECIFIC LOSS INDEMNITY

The "loss" or "loss of use" must occur within 365 days of the date of the accident. These benefits are payable on a lump sum basis and in addition to any other benefits you may receive.

| | % of Principal Sum |
|--|--------------------|
| Life | 100% |
| Both Hands or Both Feet | 100% |
| Entire Sight of Both Eyes | |
| One Hand and One Foot | 100% |
| One Hand and Entire Sight of One Eye or One Foot and Entire Sight of One Eye | 100% |
| Speech and Hearing in both Ears | 100% |
| One Arm or One Leg | 75% |
| One Hand or One Foot | 66 2/3% |
| Entire Sight of One Eye or Speech or Hearing in both Ears | 66 2/3% |
| Thumb and Index Finger of Either Hand or Four Fingers of Either Hand | 33 1/3% |
| Hearing in One Ear | 33 1/3% |
| All Toes of One Foot | 25% |
| Quadriplegia (total paralysis of all four limbs) | 200% |
| Paraplegia (total paralysis of the lower limbs) | |
| Hemiplegia (total paralysis of one side of the body) | 200% |

ACCIDENTAL MEDICAL REIMBURSEMENT BENEFIT (\$7,500)

If injury requires medical treatment within 30 days, the Company will pay for reasonable and customary expenses actually incurred for the following: (a) expenses for the services of a nurse; (b) transportation by a licensed ambulance service or, when recommended by a physician, by any other conveyance licensed to carry passengers for hire to or from the nearest hospital which is equipped to provide the required treatment; (c) hospital charges for the difference between the public ward allowance under the provincial hospital plan and the semi-private accommodation charge (private accommodation charge if recommended by a physician); (d) rental of a wheelchair, iron lung and other durable equipment for therapeutic treatment, not to exceed the purchase price prevailing at the time rental became necessary; (e) fees for the services of a licensed physiotherapist or certified athletic sports therapist, when recommended by a physician, subject to a maximum reimbursement of \$500.00 during any one policy year; (f) drugs and medicines which require the written prescription of a physician and are dispensed by a registered pharmacist or physician; (g) miscellaneous expenses for hearing aids, crutches, splints, casts, trusses and braces, but not including replacement thereof; braces do not include dental braces and are subject to a maximum of \$750.00 during any one policy year; (h) fees for the services of a licensed chiropractor, subject to a maximum reimbursement of \$500.00 during any one policy year.

DAY CARE BENEFIT (\$5,000)

If injury results in loss of life, the Company will pay 5% of the principal sum for each year the dependent child is enrolled in a legally licensed day care (not to exceed four years) for each dependent child who is under 13 years of age and enrolled in a legally licensed day care centre on the date of, or within 12 months following the accident.



EDUCATION BENEFIT (\$10,000)

If an injury results in loss of life, the Company will pay 5% of the principal sum for each dependent child who is enrolled as a full-time student in any institution of higher learning beyond the secondary school level on the date of, or within 12 months following the accident, for each year the dependent child continues his/her education in an institution of higher learning (not to exceed four years). If, at the time of loss, none of the dependent children are eligible for the Education Benefit, the Company shall pay an additional amount of \$2,500 to the designated beneficiary.

FAMILY TRANSPORTATION BENEFIT (\$15,000)

If injury results in confinement as an inpatient in a hospital, and such injury results in a loss being payable under the Accidental Death, Dismemberment and Specific Loss Indemnity, and the hospital is located at least 150 km from the insured's residence, the Company will pay the expenses actually incurred by a member of the immediate family for hotel accommodation and transportation by the most direct route to the confined insured. If transportation occurs in a vehicle or device other than one operated under a license for the conveyance of passengers for hire, then reimbursement of transportation expenses will be limited to a maximum of \$0.35 per kilometre travelled.

HOME ALTERATION AND VEHICLE MODIFICATION BENEFIT (\$15,000)

If injury requires the use of a wheelchair to be ambulatory, the Company will pay the cost of alterations to the insured's principal residence and/or the cost of modification to one motor vehicle utilized by the insured, provided such injury results in a loss payable under the Accidental Death, Dismemberment and Specific Loss Indemnity.

HOSPITAL INDEMNITY EXPENSE (\$2,500)

A daily benefit of 1/30th of 1% of the principal sum will be payable when the insured is in a hospital if such period of hospitalization is necessary for the treatment of an injury which results in a loss payable under the Accidental Death, Dismemberment and Specific Loss Indemnity and begins while this insurance is in force, subject to the above-mentioned monthly maximum.

A period of hospitalization necessary for an injury other than for a loss payable under the Accidental Death, Dismemberment and Specific Loss Indemnity will be covered as stated above, provided such hospitalization is of at least a 4-day period.

IDENTIFICATION BENEFIT (\$10,000)

If injury results in loss of life, and requires body identification, the Company will pay the expenses actually incurred by a member of the immediate family for lodging, board and transportation by the most direct route, provided the body is located not less than 150 kilometres from the member of the immediate family's residence and the identification of the body is required by the police or a similar law enforcement agency having authority over such matters. If transportation occurs in a vehicle or device other than one operated under the license for the conveyance of passengers for hire, then reimbursement of transportation expenses will be limited to a maximum of \$0.35 per kilometre travelled.

PERMANENT TOTAL DISABILITY

If an injury totally and permanently disables an insured, under age 65, within 12 months of the date of the accident, preventing the insured from engaging in any and every occupation, the Company will pay, provided such disability has continued for a period of 12 consecutive months and is total, continuous and permanent at the end of this period, the principal sum less any amounts already paid under the Accidental Death, Dismemberment and Specific Loss Indemnity as the result of the same accident.

REHABILITATION BENEFIT (\$15,000)

If injury requires that the insured undergo special training in order to be qualified to engage in a special occupation in which the insured would not have engaged except for such injury, the Company will pay the reasonable and necessary expense incurred for such training, provided such injury results in a loss payable under the Accidental Death, Dismemberment and Specific Loss Indemnity.

REPATRIATION BENEFIT (\$15,000)

If injury results in loss of life, the Company will pay the expense incurred for shipment of the body to the city of residence of the deceased.

SPOUSAL RETRAINING BENEFIT (\$15,000)

If injury results in loss of life, the Company will reimburse the spouse for the actual expenses incurred for a formal occupational training program in order to become qualified for active employment in an occupation in which the spouse would not otherwise have sufficient qualifications.

WEEKLY ACCIDENT INDEMNITY

For those who are gainfully employed on a full-time basis immediately before the date of the accident.

Total Disability

If injury results in total disability within 30 days of an accident (prior to age 65), the Company will pay 80% of gross weekly earnings to a maximum of \$750.00 for each week of total disability, following the elimination period of 7 days (if none, remove entire line) and subject to the maximum period payable of 104 weeks.

You must be under the regular care and attendance of a physician for such disability. Payments made for periods less than one week will be paid on the basis of one seventh of the weekly indemnity, for each day of total disability.

Successive periods of disability due to the same or related causes will be considered one period of disability, unless they are separated by a 30-day period during which you were actively at work.

If the indemnity is payable for total disability, either alone or in concert with any of the benefits outlined, exceeds 80% of the pre-disability gross earnings, the amount payable will be reduced by any amount exceeding said percentage.

Amounts payable will take into account any of the benefits payable under the following: (a) disability or retirement provisions of the Canada/Quebec Pension Plans; (b) benefits payable in accordance with the Workers' Compensation or Occupational Disease Act or Law, or any other law which provides compensation for an occupational injury; (c) income benefits provided by or through any Government Plan of automobile insurance or similar legislations; (d) disability, retirement or other income benefits provided by or through the Policyholder; (e) amounts paid or payable under a group insured or non-insured disability plan (including association group), and (f) amounts paid or payable under an individual insured or non-insured disability plan. Any subsequent changes to the amounts payable under the above stated benefits which are specifically designated as cost-of-living adjustments will neither reduce nor increase the amount payable.

"Total Disability" means the insured (1) is unable to perform the substantial and material duties pertaining to his occupation and (2) requires the regular care and attendance of a physician.

LIMITED AIR TRAVEL COVERAGE

Coverage includes injury sustained in consequence of riding as a passenger and not as a pilot or member of the crew; in boarding or alighting from or being struck by; or making a forced landing with or from:

- (a) any aircraft having a current and valid airworthiness certificate and which is operated by a person holding a current and valid pilot's license of a rating authorizing him to pilot such aircraft, or
- (b) any transport-type aircraft operated by the Canadian Armed Forces or by the similar air transport service of any duly constituted governmental authority of the recognized government of any nation anywhere in the world, provided the aircraft is not being used for test or experimental purposes.

Notwithstanding (a) and (b) above, coverage excludes injury sustained while and in consequence of riding as a passenger, pilot, operator or member of the crew, in or on, boarding or alighting from or being struck by or making a forced landing with or from any aircraft owned, operated or leased by the policyholder.

TERMINATION OF INSURANCE OF AN INSURED

Coverage will terminate immediately on the earliest of: (a) the policy termination date; (b) the premium due date if the Policyholder fails to pay the insured's premium, except as a result of an inadvertent error; (c) the premium due date coinciding with or immediately following the date an insured attains age 65; (d) the premium due date next following the date an insured is ineligible for coverage.

WHEN DOES THIS INSURANCE NOT APPLY?

The policy does not cover loss, fatal or non-fatal, caused by or resulting from:

- » declared or undeclared war or any act thereof;
- » active full-time service in the armed forces of any country;
- » suicide or any attempt thereat or intentionally self-inflicted Injury, while sane or insane;
- » injury sustained in consequence of riding as a passenger or otherwise in any vehicle or device for aerial navigation, except as provided in the "Limited Air Travel Coverage".

Nor does the policy cover expenses incurred:

- » sickness or disease, either as a cause or effect;
- » charges of masseur;
- » purchase, repair or replacement of eyeglasses or contact lenses or prescriptions therefor;
- » x-rays, repairs or replacement of pre-existing dentures fillings or crowns;
- » expenses incurred by an insured who is not covered under any Federal or Provincial Hospital Plan.

BENEFICIARY

Indemnity payable in the event of the loss of life of an insured is payable to the estate of the insured. All other indemnities are payable to the insured, with the exception of indemnities payable under the following parts:

Day Care Benefit Identification Benefit
Education Benefit Repatriation Benefit
Family Transportation Benefit Spousal Retraining Benefit

The policy contains a provision removing or restricting the right of the group person insured to designate persons to whom or for whose benefit insurance money is to be payable.

Every action or proceeding against an insurer for the recovery of insurance money payable under the contract is absolutely barred unless commenced within the time set out in the Insurance Act or other applicable legislation.

HOW TO CLAIM

In the event of a potential claim, the claims department should be notified as soon as possible:

Industrial Alliance Insurance and Financial Services Inc. 400-988 West Broadway, PO Box 5900 Vancouver, BC V6B 5H6

Toll free: 1-800-266-5667

E-mail: SpecialMarkets-Claims@ia.ca

or contact our Regional Office at:

204 – 26 Wellington St. East Toronto, ON M5E 1S2 Phone: (416) 498-8319 Toll free: 1-800-611-6667

E-mail: SpecialMarkets-mtl@ia.ca

We will forward the appropriate claim form(s) and request any additional information and/or documentation required.

iA Special Markets
Eastern Regional Office

Phone: (416) 498-8319 | Toll free: 1-800-611-6667

This summary is for information purposes only. For further details, refer to the Master Policy which is on file with the Policyholder. The Master Policy sets forth in detail the terms and conditions of the Plan and all rights and obligations are determined in accordance with the Master Policy issued by iA Special Markets, a division of Industrial Alliance Insurance and Financial Services Inc., not this summary.