



## Loyalist College

### Group Accident Benefit Summary

Policy Number 056/021990A

<b>Eligibility</b>	All active students under age 70 while participating in unpaid placements that are sanctioned and approved by the College and not covered by the MTCU program.
<b>Scope of Coverage</b>	Your protection applies only to Injury sustained while performing the duties of your occupation while participating in a work placement, including during the course of any bonafide trip made. Such trip shall be deemed to have commenced when you leave your residence or place of regular employment for the purpose of going on such trip, whichever last occurs, and shall continue until such time as you return to your residence or place of regular employment, whichever first occurs. Injury sustained during the course of everyday travel to and from work and bonafide leaves of absence or vacations shall not be deemed to be sustained while on business related to the work placement.
<b>Insurer</b>	Certain Underwriters at Lloyd's London through Sutton Special Risk Inc.
<b>Claim Procedures</b>	Written notice must be given to Insurer within 30 days and written proof must be submitted within 90 days of the date a claim arises.
<b>How to Claim</b>	Download and complete claims forms from <a href="http://www.suttonspecialrisk.com">www.suttonspecialrisk.com</a>
<b>Currency</b>	Benefits will be payable in Canadian currency.

### Accidental Death & Dismemberment Insurance

<b>Benefit Amount</b>	You are insured for the Principal Sum indicated below: \$100,000	
<b>Weekly Accident Indemnity</b>	<b>Weekly Amount:</b>	\$388
	<b>Elimination Period:</b>	7 days each and every loss (benefits commence on 1st day of hospitalization)
	<b>Maximum Number of Weeks Payable:</b>	52 weeks
<b>Permanent Total Disability</b>	Benefit Amount: \$100,000 'Permanently Disabled' means that in the opinion of the independent referees, the Insured Person is wholly and permanently disabled and prevented for the remainder of his or her life, from engaging in any and every occupation, profession, or employment for compensation for which he or she is reasonably or may reasonably become qualified by education, training or experience.	
<b>Additional Benefits</b>	<ul style="list-style-type: none"> <li>▪ Accident Medical Expense Benefit - maximum \$10,000</li> <li>▪ Accident Dental Expense Benefit – maximum \$1,000</li> <li>▪ Surgical Reattachment - 50% of specific loss benefit</li> <li>▪ Repatriation - maximum \$15,000</li> <li>▪ Identification - maximum \$15,000</li> <li>▪ Rehabilitation - maximum \$15,000</li> <li>▪ Rehabilitative Physical Therapy - maximum \$10,000</li> <li>▪ Funeral - maximum \$5,000</li> <li>▪ Bereavement - maximum \$1,500 (limited to 6 sessions)</li> <li>▪ Spousal Retraining - maximum \$15,000</li> <li>▪ Special Education - 5% of Benefit Amount to maximum of \$10,000 per year</li> <li>▪ Day Care - 5% of Benefit Amount to maximum of \$5,000 per year</li> <li>▪ Family Transportation - maximum \$15,000</li> <li>▪ Home Alteration &amp; Vehicle Modification - maximum \$25,000 or 10% of Benefit Amount to a maximum of \$50,000, whichever is greater</li> <li>▪ Seat Belt - 10% of Benefit Amount</li> <li>▪ Parental Care - 10% of Benefit Amount to a maximum of \$10,000</li> </ul> <p><b>The additional benefits provided under the plan include the benefits listed above. For coverage provisions and limitations contact your plan administrator.</b></p>	

This Benefits Summary highlights the principal features of the plan, which is governed by the terms of the master policy

<b>Exposure</b>	If, while this coverage is in force, you are unavoidably exposed to the elements due to an accident and if, as the result of such exposure and within 365 days of the accident, you suffer a loss which would otherwise be payable, such loss will be covered.																																																								
<b>Disappearance</b>	If you disappear and your body is not found within one year and sufficient evidence is provided and confirms that you sustained accidental bodily injury which caused your death, the Insurer will pay the Principal Sum, provided that the person or persons to whom such sum is paid sign an undertaking to refund such sum to the Insurer if you are subsequently found to be living.																																																								
<b>Aggregate Limit</b>	\$9,500,000 for any one known accumulation and NIL per any one Aircraft accumulation																																																								
<b>Loss Schedule</b>	<p>If your bodily injuries result in your Accidental Death, Dismemberment, Loss of Speech and/or Hearing, Paralysis and Loss of Use occurring within 12 months of the date of the accident, the Insurer will pay the percentage of the Principal Sum shown opposite such loss. Each sum is calculated based on your amount of Principal Sum.</p> <p style="text-align: right;"><b>Percentage of Principal Sum</b></p> <table border="0"> <tr><td>Loss of Life.....</td><td>100%</td></tr> <tr><td>Loss of or Loss of Use of Both Arms .....</td><td>100%</td></tr> <tr><td>Loss of or Loss of Use of Both Legs.....</td><td>100%</td></tr> <tr><td>Loss of or Loss of Use of Both Hands.....</td><td>100%</td></tr> <tr><td>Loss of or Loss of Use of Both Feet .....</td><td>100%</td></tr> <tr><td>Loss of Entire Sight of Both Eyes .....</td><td>100%</td></tr> <tr><td>Loss of or Loss of Use of One Hand and One Foot.....</td><td>100%</td></tr> <tr><td>Loss of or Loss of Use of One Hand and Entire Sight of One Eye .....</td><td>100%</td></tr> <tr><td>Loss of or Loss of Use of One Foot and Entire Sight of One Eye.....</td><td>100%</td></tr> <tr><td>Loss of or Loss of Use of One Arm .....</td><td>75%</td></tr> <tr><td>Loss of or Loss of Use of One Leg .....</td><td>75%</td></tr> <tr><td>Loss of or Loss of Use of One Hand .....</td><td>67%</td></tr> <tr><td>Loss of or Loss of Use of One Foot.....</td><td>67%</td></tr> <tr><td>Loss of Entire Sight of One Eye .....</td><td>67%</td></tr> <tr><td>Loss of or Loss of Use of Thumb and Index Finger of Any One Hand .....</td><td>33%</td></tr> <tr><td>Loss of or Loss of Use of Four Fingers of Any One Hand .....</td><td>33%</td></tr> <tr><td>Loss of All Toes on One Foot.....</td><td>25%</td></tr> <tr><td colspan="2"> </td></tr> <tr><td>Loss of Speech and Hearing in Both Ears.....</td><td>100%</td></tr> <tr><td>Loss of Speech.....</td><td>67%</td></tr> <tr><td>Loss of Hearing in Both Ears.....</td><td>67%</td></tr> <tr><td>Loss of Hearing in One Ear .....</td><td>25%</td></tr> <tr><td colspan="2"> </td></tr> <tr><td>Paraplegia (Both Lower Limbs).....</td><td>200%</td></tr> <tr><td>Hemiplegia (Upper and Lower Limbs on the Same Side of the Body).....</td><td>200%</td></tr> <tr><td>Quadriplegia (Both Upper and Lower Limbs) .....</td><td>200%</td></tr> <tr><td colspan="2"> </td></tr> <tr><td>Brain Death .....</td><td>100%</td></tr> </table> <p><b>NOTE:</b> If more than one of the losses occur as the result of one accident, the total amount payable shall not exceed the Principal Sum or in the case of Paralysis, benefits shall not exceed 200% of the Principal Sum.</p>	Loss of Life.....	100%	Loss of or Loss of Use of Both Arms .....	100%	Loss of or Loss of Use of Both Legs.....	100%	Loss of or Loss of Use of Both Hands.....	100%	Loss of or Loss of Use of Both Feet .....	100%	Loss of Entire Sight of Both Eyes .....	100%	Loss of or Loss of Use of One Hand and One Foot.....	100%	Loss of or Loss of Use of One Hand and Entire Sight of One Eye .....	100%	Loss of or Loss of Use of One Foot and Entire Sight of One Eye.....	100%	Loss of or Loss of Use of One Arm .....	75%	Loss of or Loss of Use of One Leg .....	75%	Loss of or Loss of Use of One Hand .....	67%	Loss of or Loss of Use of One Foot.....	67%	Loss of Entire Sight of One Eye .....	67%	Loss of or Loss of Use of Thumb and Index Finger of Any One Hand .....	33%	Loss of or Loss of Use of Four Fingers of Any One Hand .....	33%	Loss of All Toes on One Foot.....	25%			Loss of Speech and Hearing in Both Ears.....	100%	Loss of Speech.....	67%	Loss of Hearing in Both Ears.....	67%	Loss of Hearing in One Ear .....	25%			Paraplegia (Both Lower Limbs).....	200%	Hemiplegia (Upper and Lower Limbs on the Same Side of the Body).....	200%	Quadriplegia (Both Upper and Lower Limbs) .....	200%			Brain Death .....	100%
Loss of Life.....	100%																																																								
Loss of or Loss of Use of Both Arms .....	100%																																																								
Loss of or Loss of Use of Both Legs.....	100%																																																								
Loss of or Loss of Use of Both Hands.....	100%																																																								
Loss of or Loss of Use of Both Feet .....	100%																																																								
Loss of Entire Sight of Both Eyes .....	100%																																																								
Loss of or Loss of Use of One Hand and One Foot.....	100%																																																								
Loss of or Loss of Use of One Hand and Entire Sight of One Eye .....	100%																																																								
Loss of or Loss of Use of One Foot and Entire Sight of One Eye.....	100%																																																								
Loss of or Loss of Use of One Arm .....	75%																																																								
Loss of or Loss of Use of One Leg .....	75%																																																								
Loss of or Loss of Use of One Hand .....	67%																																																								
Loss of or Loss of Use of One Foot.....	67%																																																								
Loss of Entire Sight of One Eye .....	67%																																																								
Loss of or Loss of Use of Thumb and Index Finger of Any One Hand .....	33%																																																								
Loss of or Loss of Use of Four Fingers of Any One Hand .....	33%																																																								
Loss of All Toes on One Foot.....	25%																																																								
Loss of Speech and Hearing in Both Ears.....	100%																																																								
Loss of Speech.....	67%																																																								
Loss of Hearing in Both Ears.....	67%																																																								
Loss of Hearing in One Ear .....	25%																																																								
Paraplegia (Both Lower Limbs).....	200%																																																								
Hemiplegia (Upper and Lower Limbs on the Same Side of the Body).....	200%																																																								
Quadriplegia (Both Upper and Lower Limbs) .....	200%																																																								
Brain Death .....	100%																																																								
<b>Exclusions</b>	<p>This insurance does not cover any claim arising out of bodily injury caused or contributed to by:</p> <ol style="list-style-type: none"> <li>declared or undeclared war or any act thereof or invasion;</li> <li>actively participating in acts of terrorism, civil commotions or riots of any kind;</li> <li>training, serving or taking part in any capacity in the armed forces (land, sea or air) or their operations, of any country or international authority;</li> <li>while serving as a pilot or crew member of any aircraft or while as a passenger in an aircraft which is being used for a purpose other than transportation;</li> <li>suicide or attempted suicide or intentional self-injury;</li> <li>injury sustained while you are riding in, boarding or alighting from an aircraft owned or leased, by or on behalf of the Insured, or any subsidiary or affiliate of such Insured, unless specific written agreement has been obtained from the Insurer; or</li> <li>acts of terrorism which involve the use or release or the threat thereof of any nuclear weapon or device or chemical or biological agent, regardless of any contributory cause(s).</li> </ol>																																																								
<b>Payment of Benefits</b>	Benefits for Loss of Life are payable to the Insured Person's designated beneficiary (or to the Insured Person's Estate if no such designation is made). Any other benefits are paid to the Insured Person.																																																								

**This Benefits Summary highlights the principal features of the plan, which is governed by the terms of the master policy**