## **Group Policy Schedule**

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# Schools' £600,000 Personal Accident (Incorporating Dental) Insurance

| Policy Number:   | UKBCHD05097   |  |
|--|---|--|
| The Group Policyholder:  | Harrodian School Limited and The Harrodian Library<br>Publications Limited  |  |
| Address:   | Lonsdale Road, Barnes, London, SW13 9QN, United Kingdom   |  |
| Renewal Date:  | 01 September 2022   |  |
| Period of Insurance:   | <ul> <li>a) i) From: 1st September 2021 (the Start Date)</li> <li>ii) To: 31st August 2022</li> <li>(both dates inclusive)</li> <li>If the term commences before the 1st September 2021 cover will commence from 00.01 hours local standard time on the earliest date. Cover will expire on 24.00 hours local standard time on 31st August 2022</li> <li>b) Any subsequent period for which We shall agree to accept a renewal premium</li> </ul> |  |
| Period of Cover:   | Cover in respect of each Insured Person will commence on<br>the Start Date or the date which the Insured Person is advised<br>by the Group Policyholder that their cover is operative if after<br>the Start Date  |  |
| Premium (inclusive of Insurance Premium Tax at the applicable rate): | To be declared  |  |
| Applicable Policy<br>Wording:  | C1507/06 0321   |  |
| Date of issue:   | 30th July 2021  |  |

| Insured Persons |   |             |  |
|-----------------|---|-------------|--|
| Category A      | Any <b>Pupil</b> enrolled at the <b>Group Policyholder's</b> school.  | Insured     |  |
| Category B      | Any <b>Employee</b>   | Not Insured |  |
| Category C      | Any member of the board of governors (school governor) of the <b>Group Policyholder's</b> school.                                 | Insured     |  |
| Category D      | Any person who is acting in a capacity as a volunteer, assistant or helper under the direction of the <b>Group Policyholder</b> . | Insured     |  |

#### **Effective Time**

| Effective           | Time   |  |
|---------------------|--|--|
| Category A          | 24 hours a day for the duration of each <b>Term</b> during the <b>Period of Insurance</b> , including;   |  |
|                     | <ul> <li>a. the uninterrupted journey to the <b>Group Policyholder's</b> school prior to<br/>the commencement of a <b>Term</b>; and</li> </ul>   |  |
|                     | b. the holiday break that immediately follows the end of <b>Term</b> .   |  |
|                     | If a <b>Pupil</b> is not returning to the <b>Group Policyholder's</b> school at the start of a <b>Term</b> due to;   |  |
|                     | <ul> <li>the <b>Pupil</b> transferring to another primary or secondary school within the <b>United Kingdom</b>, cover will continue until the commencement of the uninterrupted journey to the new school; or</li> </ul>   |  |
|                     | b. the <b>Pupil</b> completing their secondary education or transferring to a school outside the <b>United Kingdom</b> , cover will continue during the holiday break following the end of <b>Term</b> , but only whilst the <b>Pupil</b> is participating in official organised activities under the auspices of the <b>Group Policyholder</b> , including uninterrupted travel between the location of the activity and their home; or |  |
|                     | c. any reason other than in a. or b. above, cover ceases at the end of the<br>Pupil's uninterrupted journey home at the end of their last day at the<br>Group Policyholder's school.   |  |
| Category B          | 24 hours a day anywhere in the world.  |  |
| Categories C<br>& D | <ul> <li>Whilst undertaking duties of the <b>Group Policyholder</b>;</li> <li>a. in the <b>United Kingdom</b> excluding travel directly between home and the location the school duties are being undertaken; or</li> <li>b. outside the <b>United Kingdom</b> including travel directly between home and the location the school duties are being undertaken.</li> </ul>  |  |

# Schedule of Benefits – £600,000 Plan

The maximum amount payable for any one Claim under Sections 1, 3 and 4 in total is; £600,000 for Pupils and Employees

£100,000 for school governors, volunteers, assistants or helpers See Section 4 Supplemental Benefit for full details of cover

Cover only applies to those Categories of Insured Persons stated as 'Insured' in the Group Policy Schedule.

### SECTION 1. Serious Injury

|      |   | Benefit Amount                      |                                     |
|------|---|-------------------------------------|-------------------------------------|
| Item | Benefit Description   | Insured Persons<br>Categories A & B | Insured Persons<br>Categories C & D |
| 1    | Organic paralysis   | £250,000                            | £100,000                            |
| 2    | Loss of intellectual capacity   | £250,000                            | £100,000                            |
| 3    | Loss of sight in both eyes  | £250,000                            | £100,000                            |
| 4    | Loss of upper limbs (both)  | £250,000                            | £100,000                            |
| 5    | Loss of lower limbs (both)  | £250,000                            | £100,000                            |
| 6    | Loss of upper limb (one) and Loss of lower limb (one)                 | £250,000                            | £100,000                            |
| 7    | Loss of sight in one eye  | £120,000                            | £48,000                             |
| 8    | Loss of upper limb (one)  | £120,000                            | £48,000                             |
| 9    | Loss of lower limb (one)  | £120,000                            | £48,000                             |
| 10   | Loss of hearing in both ears  | £120,000                            | £48,000                             |
| 11   | Total loss of or total loss of use of:                                |                                     |                                     |
|      | a. lung   | £120,000                            | £48,000                             |
|      | b. a hip, knee or ankle   | £100,000                            | £40,000                             |
|      | c. the back or spine below the neck with no damage to the spinal cord | £100,000                            | £40,000                             |
|      | d. the neck or cervical spine with no damage to the spinal cord       | £75,000                             | £30,000                             |
|      | e. a shoulder or elbow  | £75,000                             | £30,000                             |
|      | f. a thumb or wrist   | £65,000                             | £26,000                             |
|      | g. the jaw  | £40,000                             | £17,000                             |
|      | h. a kidney   | £35,000                             | £14,000                             |
|      | i. a big toe  | £35,000                             | £14,000                             |
|      | j. a finger   | £25,000                             | £10,000                             |
|      | k. spleen   | £20,000                             | £8,000                              |
|      | l. any other toe  | £10,000                             | £4,000                              |
| 12   | Loss of hearing in one ear  | £25,000                             | £10,000                             |
| 13   | Loss of smell and Loss of taste                                       | £25,000                             | £10,000                             |

To ensure an **Insured Person** is provided with a payment for a **Permanent Disability** that is not listed above, Chubb will assess medical evidence to calculate the degree of disablement relative to this scale. No account shall be taken of the **Insured Person's** occupation. For example if **Bodily Injury** results in 25% of the loss of sight in one eye, Chubb will pay 25% of the **Benefit Amount** for item 7 in this Scale.

| SECTION Accide | DN 2.<br>ntal death  |                |
|----------------|--|----------------|
| Item           | Benefit Description  | Benefit Amount |
| 1              | Accidental death – Category A (Pupils)   | £7,500         |
| 2              | Accidental death – Category B (Employees) aged under 18 years  | £7,500         |
| 3              | <b>Accidental</b> death – Category B ( <b>Employees</b> ) aged 18 years and over   | £100,000       |
| 4              | <b>Accidental</b> death – Category C & D (School Governors / Volunteers/<br>Helpers / Assistants) aged under 18 years    | £7,500         |
| 5              | <b>Accidental</b> death – Category C & D (School Governors / Volunteers/<br>Helpers / Assistants) aged 18 years and over | £100,000       |

| SECTION 3. Disfigurement or scarring of the Face and Body |  |  |  |
|---|--|--|--|
|   |  | Benefit Amount                           |  |
| Item  | Benefit Description  | Insured Persons<br>Categories A, B, C, D |  |
| 1   | A. Face  |  |  |
|   | i. Minimum Benefit at least one square centimetre or two centimetres in length | £250                                     |  |
|   | ii. Maximum Benefit whole area of the <b>Face</b>                              | £5,000                                   |  |
|   | B. Body  |  |  |
|   | 4% or more of the Total Body Surface Area                                      | £3,000                                   |  |
|   | 15% or more of the Total Body Surface Area                                     | £6,000                                   |  |
|   | 25% or more of the Total Body Surface Area                                     | £10,000                                  |  |

# SECTION 4. Supplemental Benefit -Cover for Category A (Pupils) & Category B (Employees) only Benefit Amount Item Benefit Description Insured Persons Categories A & B 1 Supplemental Benefit If an Insured Person described in Category A (Pupil) or Category B (Employee) sustains Bodily Injury resulting in a Permanent Disability insured under Items 1 to 14 of Section 1 (Serious Injury) and/or Section 3 (Disfigurement or scarring of the Face and Body) and the total Benefit Amount payable reaches £250,000, a Supplemental

payable of £600,000.
This Section does not apply to **Insured Persons** described in Categories C (school governors) and D (volunteers, assistants or helpers). The Supplemental Benefit is not payable to those **Insured Persons**.

Benefit of £350,000 is also payable making a total **Benefit Amount** 

|      | N 5.<br>Injury and Dental Emergency Treatment - Cover for Category A (Pup<br>yees) only  | ils) & Category B                   |
|------|--|-------------------------------------|
|      |  | Benefit Amount                      |
| Item | Benefit Description  | Insured Persons<br>Categories A & B |
| 1    | Dental Injury  |                                     |
|      | Total loss of permanent natural teeth  |                                     |
|      | a. Total permanent physical loss of anterior tooth (canine or incisor)   | £2,000 per tooth                    |
|      | b. Total permanent physical loss of posterior tooth (molar or pre-molar)   | £1,250 per tooth                    |
|      | Partial loss of natural teeth  |                                     |
|      | c. Partial loss of anterior and / or posterior tooth   | Up to £500 per tooth                |
|      | Loss of Vitality   |                                     |
|      | d. The total <b>Loss of Vitality</b> of a permanent natural tooth  | £500 per tooth                      |
|      | Total amount payable in respect of any one <b>Claim</b> under Items c & d  | £2,000                              |
|      | e. <b>Dental Treatment</b> following <b>Dental Injury</b> (Insured Persons under age 18 years)   | Up to £10,000                       |
|      | f. <b>Dental Treatment</b> following <b>Dental Injury</b> (Insured Persons age 18 years and over)  | Up to £10,000                       |
|      | Total amount payable for any one <b>Claim</b> under Items e & f ( <b>Dental Treatment</b> that exceeds £750 must first be approved by <b>Chubb</b> ) | £10,000                             |
|      | g. <b>Dental Treatment</b> following <b>Dental Injury</b> requiring <b>Dental Implant(s)</b>   | Up to £2,000<br>per Dental Implant  |
|      | Total amount payable for any one <b>Claim</b> under Item g   | £10,000                             |
| 2    | <b>Emergency Dental Treatment</b>  | Up to £2,000                        |
| 3    | Surgical Extraction of Third Molars (Wisdom Teeth)   | £125 per tooth                      |
| 4    | In-patient Hospital Stay (up to 365 nights maximum)  | £125 per night                      |
| 5    | Mouth Cancer treatment   | Up to £12,000                       |
|      |  |                                     |

| Section 6. Fractures - Cover for Category A (Pupils) & Category B (Employees) only |   |                                     |  |
|--|---|-------------------------------------|--|
| Benefit Amount   |   |                                     |  |
| Item   | Benefit Description   | Insured Persons<br>Categories A & B |  |
| 1  | Hip or pelvis (excluding coccyx or thigh)   | £1,000                              |  |
| 2  | Femur or heel   | £500                                |  |
| 3  | Skull (excluding jaw and nose) lower leg, collar bone, ankle, elbow, upper or lower arm (including the wrist, but not a colles' fracture) | £500                                |  |
| 4  | Spine (vertebrae, but excluding coccyx)   | £1,500                              |  |
|  | Maximum amount payable for all <b>Fractures</b> due to one <b>Accident</b>  | £5,000                              |  |

Up to £125

Incidental Expenses

6

| SECTION | 7. |
|---------|----|

Additional Benefits payable following certain valid claims under Section 1. Serious Injury or Section 2 Accidental Death

|       |  |   | <b>Benefit Amount</b>                           |                     |
|-------|--|---|---|---------------------|
|       |  |   | <b>Insured Persons</b>                          |                     |
| ltem  | Benefit Description  | Category A                                      | Category B                                      | Categories<br>C & D |
| 1     | Catastrophic Accident  | Not Insured                                     | Up to £600,000                                  | Not Insured         |
| 2     | 1  | Up to 10% of<br>penefit paid<br>under Section 1 | Up to 10% of<br>benefit paid<br>under Section 1 | Not Insured         |
| 3     | Child / children   | Not Insured                                     | £8,000  | Not Insured         |
| 4     | Cosmetic Surgery   | Up to £10,000                                   | Up to £10,000                                   | Not Insured         |
| 5     | Dependent Adult  | Not Insured                                     | £25,000   | Not Insured         |
| 6     | Estate Administration  | Up to £2,000                                    | Up to £2,000                                    | Up to £2,000        |
| 7     | Funeral Expenses   | Up to £10,000                                   | Up to £10,000                                   | Not Insured         |
| 8     | Home Adaption / Relocation   | £50,000   | £50,000   | Not Insured         |
| 9     | Home Help & Childcare  | Not Insured                                     | Up to £10,000                                   | Not Insured         |
| 10    | Independent Financial Advice   | Not Insured                                     | Up to £2,500                                    | Not Insured         |
| 11    | Injury Medical Expenses  | Up to £30,000                                   | Up to £30,000                                   | Up to £30,000       |
| 12    | Prosthesis   | Up to £10,000                                   | Up to £10,000                                   | Not Insured         |
| 13    | Psychological Counselling  | Up to £2,000                                    | Up to £2,000                                    |                     |
| 14    | Rehabilitation Case Management & Treatment                           | Not Insured                                     | Up to £5,000                                    | Not Insured         |
| 15    | Retraining for a Partner   | Not Insured                                     | Up to £15,000                                   | Not Insured         |
| ECTIO |  |   |   |                     |
| autom | atic Additional Benefits   |   | Benefit Amou                                    | nt                  |
|       |  |   | Insured Perso                                   | ns                  |
| tem   | Benefit Description  | Category A                                      | Category B                                      | Categories<br>C & D |
|       | Coma within Country of Domicile (Up to 73 days maximum)              | o £100 a day                                    | £100 a day                                      | Not Insured         |
| 1     | Hospital Stay within Country of Domicile<br>(Up to 365 days maximum) | £50 a day                                       | £75 a day                                       | Not Insured         |
|       | Hospital Transfer  | Up to £5,000                                    | Up to £5,000                                    | Not Insured         |
|       | Hospital Visiting  | Up to £100 a<br>day                             | Up to £100 a<br>day                             | Not Insured         |
|       | Maximum amount payable for any one <b>Claim</b>                      | £5,000  | £5,000  |                     |
|       | Lifesaver**  | £25,000   | £25,000   | £25,000             |
|       |  |   |   |                     |
|       | Loss of or Damage to Personal Belongings                             | Up to £2,000                                    | Up to £2,000                                    | Not Insured         |

| 7  | Recruitment Expenses following suicide** | Not Insured  | Up to £15,000 | Not Insured |
|----|--|--------------|---------------|-------------|
| 8  | Return Home                              | Up to £2,000 | Up to £2,000  | Not Insured |
| 9  | Trauma Counselling                       | Up to £2,000 | Up to £2,000  | Not Insured |
| 10 | Workplace Assault                        | Not Insured  | Up to £5,000  | Not Insured |

<sup>\*\*</sup> Note that in respect of Item 5 (Lifesaver) and Item 7 (Recruitment Expenses following suicide) the **Benefit Amount** is payable to the **Group Policyholder** only and cover applies regardless of whether Insured Persons Category B (Employees) in the **Group Policy Schedule** is stated as 'Insured' or Not Insured'.

| SECTION Assista  |  |                                    |
|------------------|--|------------------------------------|
| Item             | Benefit Description                            |                                    |
| 1                | Assistance Services                            |                                    |
| SECTION Crisis I | ON 10<br>Management                            |                                    |
| Item             | Benefit Description                            | Benefit Amount                     |
| 1                | Crisis Management                              | Up to £75,000 per<br><b>Crisis</b> |
|                  | Aggregate Limit in any one Period of Insurance | £75,000                            |

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