

ENDORSEMENT NO. 1

It is understood and agreed between the Policyholder and the Company that notwithstanding anything contained herein to the contrary, effective March 31, 2018, this policy covers Injury sustained in consequence of riding as a pilot, a student pilot under the direction of a qualified flight instructor 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 military or civil aircraft or any aircraft owned, operated or Leased by the Policyholder, provided such aircraft has a current and valid Airworthiness Certificate, is being operated at the time with the consent of the Policyholder, and is operated by a person holding a current and valid pilot's license of rating authorizing him to pilot such aircraft.

For the purpose of this policy, any person receiving flight instruction will be considered to hold a current and valid pilot's license of a rating authorizing him to pilot such aircraft, provided that (a) he is accompanied at the time by a qualified flight instructor who holds the necessary pilot and instructor ratings for such aircraft or (b) each flight is directly approved by a qualified flight instructor who holds the necessary pilot and instructor ratings for such aircraft.

ADDITIONAL EXCLUSIONS

The extended insurance afforded by this endorsement does not apply to any loss, fatal or non-fatal, caused by or resulting from Injury sustained while the Insured Person is:

- 1) flying in any licensed aircraft while it is being used for or in connection with acrobatic or stunt flying, racing or endurance tests;
- 2) flying in any licensed aircraft while it is being used for or in connection with crop dusting or seeding or spraying, pipe or power line inspection, any form of hunting, bird or fowl herding, banner towing or any test or experimental purpose, unless previously consented to in writing by the Company.

Nothing herein contained shall be held to vary, alter, waive or extend any of the Declarations, Agreements, Exclusions or Conditions of the undermentioned Policy other than as above stated.

Attached to and forming part of Policy No. 100001394 issued to Air Cadet League of Canada, by **INDUSTRIAL ALLIANCE INSURANCE AND FINANCIAL SERVICES INC.**



Registrar





Industrial Alliance Insurance and Financial Services Inc.

(hereinafter called the Company)

Issued to: AIR CADET LEAGUE OF CANADA

(hereinafter called the Policyholder)

Policy Number: 100001394 (replacing policy issued March 31, 2015)

Effective Date: MARCH 31, 2018

Expiry Date: MARCH 31, 2019

In consideration of the payment in advance of the premium in the amount and in the manner set forth herein, the Company agrees to insure eligible persons of the Policyholder who are named or designated herein and for whom application is made by the Policyholder, for loss resulting from Injury to the extent herein provided and subject to all the exclusions, limitations and provisions of this policy.

All periods of time under this policy begin and end at 12:01 a.m., Standard Time, at the address of the Policyholder.

This policy may be renewed only with the consent of the Company for further consecutive terms upon payment of the premium at the rate and in the amount determined by the Company at the time of renewal. The first day of each such term will be a premium due date.

The provisions set forth on the following pages together with this page constitute the policy.

In witness whereof, the Company has caused this policy to be executed by its President and Chief Executive Officer and Corporate Secretary, but it will not be binding upon the Company until countersigned by the Company's Registrar.

Handwritten signature of Joan Orest in black ink.

PRESIDENT AND CHIEF EXECUTIVE OFFICER

Handwritten signature of Jennifer Ribblee in black ink.

CORPORATE SECRETARY

COUNTERSIGNED

Handwritten signature of the Registrar in black ink.

REGISTRAR

DEFINITIONS

“**Accident**” whenever used in this policy means a sudden, unforeseen and unexpected event which arises from a source external to an Insured Person and that is not caused or contributed to, directly or indirectly, by physical or mental illness or disease or treatment for the illness or disease. This event must occur while this policy is in force and be the basis of claim.

“**Airworthiness Certificate**” whenever used in this policy means “Standard” Airworthiness Certificate issued by the Federal Aviation Agency of Canada or its foreign equivalent issued by the governmental authority having jurisdiction over civil aviation in the country of its registry.

“**Day Care Centre**” whenever used in this policy means a facility which is operated according to law, including laws and regulations applicable to day care facilities and which provides care and supervision for children in a group setting on a regular basis. Day Care Centre will not include a Hospital; the child's home or care provided during normal school hours while a child is attending grades 1 through 12.

“**Dependent Child**” whenever used in this policy means any natural child, stepchild, or legally adopted child of the Insured Person, who receives support and maintenance from the Insured Person and is:

- (a) under 21 years of age and unmarried and who is not engaged in gainful employment more than 25 hours per week at the time of Loss; or
- (b) 21 years of age and over, but less than 26 years of age, unmarried, and is in full-time attendance at a School for Higher Learning and who is not engaged in gainful employment more than 25 hours per week at the time of Loss; or
- (c) mentally or physically infirm, incapable of self-sustaining employment and who is considered a dependent of the Insured Person within the terms of the Income Tax Act (Canada) or equivalent.

Notwithstanding the above limitations, this definition will also include a child of the Insured Person's Spouse who is in the care, custody and control of the Insured Person and living in a parent-child relationship with the Insured Person.

“**Disability**” whenever used in this policy means Total Disability.

“**Division Headquarters**” whenever used in this policy means Special Markets Solutions Division Headquarters of Industrial Alliance Insurance and Financial Services Inc. located at 2165 Broadway West, PO Box 5900, Vancouver, British Columbia, V6B 5H6.

“**Flight Time**” whenever used in this policy means the total time from the moment the aircraft first moves under its own power for the purpose of take-off until the moment it comes to rest at the end of the flight.

“**His Occupation**” whenever used in this policy means the occupation engaged in by the Insured Person for wage or profit immediately prior to the occurrence of any Injury for which benefits become payable under this policy.

“**Hospital**” whenever used in this policy means an institution operated pursuant to law for the care and treatment of sick and injured persons, with organized facilities for diagnosis, major surgery and 24 hour nursing service. This does not include a convalescent or nursing home, or home for the aged, or health spa, or rehabilitation centre, or a facility for the treatment of alcoholism, drug addiction or mental illness.

DEFINITIONS (Continued...)

“Injury” whenever used in this policy means bodily injury caused by an Accident occurring while this policy is in force as to the Insured Person whose injury is the basis of claim and resulting directly and independently of all other causes in loss covered by this policy, and that is not caused or contributed to, directly or indirectly, by physical or mental illness or disease or treatment for the illness or disease.

“Insurance Act” whenever used in this policy means the applicable insurance legislation in the applicable provincial jurisdiction.

“Insured Person” whenever used in this policy means persons or categories of persons as designated in Section 1 of the Schedule.

“Leased” whenever used in this policy means an aircraft whose possession is turned over to a firm or individual for a specified period of time, with the owner retaining full title to such aircraft.

“Loss” whenever used in this policy with reference to hand or foot means complete severance at or above the wrist or ankle joint but below the elbow or knee joint; as used with reference to arm or leg means complete severance at or above the elbow or knee joint; as used with reference to thumb and fingers means complete severance at or above the metacarpophalangeal joint; as used with reference to toes means complete severance at or above the metatarsophalangeal joint; as used with reference to eye means the irrecoverable loss of the entire sight thereof; as used with reference to speech means the total and irrecoverable loss thereof; as used with reference to hearing means the total and irrecoverable loss thereof; and as used with reference to Quadriplegia, Paraplegia and Hemiplegia means the permanent and irrecoverable paralysis of such limbs.

“Loss of Use” whenever used in this policy means a loss which is permanent, total, irrecoverable and continuous for a period of 12 months from the date of the Accident.

“Member of the Crew” whenever used in this policy means a person assigned to duty in an aircraft during Flight Time and whose occupation is related to the safety of passengers, the operation and/or the actual flying of the aircraft.

“Member of the Immediate Family” whenever used in this policy means a person at least 18 years of age, who is the son, daughter, father, mother, brother, sister, son-in-law, daughter-in-law, father-in-law, mother-in-law, brother-in-law, sister-in-law (all of the above includes natural, adopted or step relationships), Spouse, grandson, granddaughter, grandfather or grandmother of the Insured Person.

“Nurse” whenever used in this policy means a graduate registered nurse (R.N.) or nurse who is licensed to practise nursing service by a governmental agency having jurisdiction over such licensing. The nurse is neither the Insured Person nor a Member of the Immediate Family and must not ordinarily reside in the Insured Person’s Residence.

“Physician” whenever used in this policy means a doctor of medicine (other than the Insured Person or a Member of the Immediate Family) who is licensed to practise medicine by 1) a recognized medical licensing organization in the locale where the treatment is rendered, provided he is a member in good standing of such licensing organization, or 2) a governmental agency having jurisdiction over such licensing in the locale where the treatment is rendered.

DEFINITIONS (Continued...)

“Principal Sum” whenever used in this policy means the amount of insurance for which the Insured Person is covered, as shown in the records of the Company and/or the Policyholder.

“Regular Care and Attendance” whenever used in this policy means medical treatment to the extent necessary under existing standards of medical practice for the condition causing disability, Hospital confinement or requiring such treatment.

“Residence” whenever used in this policy means the primary dwelling of which the Insured Person is an occupant and the premises on which it is situated.

“School for Higher Learning” whenever used in this policy includes any university, college, CEGEP { Collège d’Enseignement Général et Professionnel (community colleges in Quebec)} or trade school.

“Seat Belt” whenever used in this policy means those belts that form a restraint system and includes infant and child restraint systems when properly used with a Seat Belt.

“Spouse” whenever used in this policy means a person who is under the age of 70 and;

- (a) to whom the Insured Person is legally married;
- (b) to whom the Insured Person is married by a marriage that is voidable and has not been declared null and void; or
- (c) with whom the Insured Person has continuously cohabited and who has been publicly represented as the Insured Person’s Spouse for a minimum of 12 months immediately before a Loss is incurred under this policy.

Only one individual will qualify as a Spouse.

If the Insured Person is legally married but is also cohabiting with an individual as described under (b) or (c) above, the Insured Person may elect in writing which one of the individuals will qualify as a Spouse under this policy. This election must be filed with the Policyholder. The Company will not be bound by an election not filed before the event insured against. If an election is not filed, the Spouse will be the individual to whom the Insured Person is legally married.

“Total Disability” whenever used in this policy means that the Insured Person (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.

“Vehicle” whenever used in this policy means a passenger car, station wagon, van, jeep-type automobile or truck.

Whenever a reference to the masculine gender appears in this policy, it will also be construed to include the feminine gender.

ACCIDENTAL DEATH, DISMEMBERMENT AND SPECIFIC LOSS INDEMNITY

If, within 12 months of the date of the Accident, Injury results in any of the following losses, the Company will pay for Loss of or permanent and total Loss of Use of:

Life.....	The Principal Sum
Both Hands	The Principal Sum
Both Feet.....	The Principal Sum
Entire Sight of Both Eyes	The Principal Sum
One Hand and One Foot	The Principal Sum
One Hand and the Entire Sight of One Eye	The Principal Sum
One Foot and the Entire Sight of One Eye	The Principal Sum
Speech and Hearing in Both Ears	The Principal Sum
One Arm.....	4/5 of the Principal Sum
One Leg.....	4/5 of the Principal Sum
One Hand	3/4 of the Principal Sum
One Foot	3/4 of the Principal Sum
Entire Sight of One Eye	3/4 of the Principal Sum
Speech or Hearing in Both Ears.....	3/4 of the Principal Sum
Thumb and Index Finger of Either Hand.....	2/5 of the Principal Sum
Four Fingers of Either Hand.....	2/5 of the Principal Sum
Hearing in One Ear	2/5 of the Principal Sum
All Toes of One Foot	1/3 of the Principal Sum

PARALYSIS BENEFITS

Quadriplegia (complete paralysis of both upper and lower limbs)	Two Times the Principal Sum
Paraplegia (complete paralysis of both lower limbs)	Two Times the Principal Sum
Hemiplegia (complete paralysis of upper and lower limbs of one side of body)	Two Times the Principal Sum

Indemnity provided under this part for all losses sustained by an Insured Person as the result of any one Accident will not exceed the following:

- (a) With the exception of Quadriplegia, Paraplegia and Hemiplegia, the Principal Sum;
- (b) With respect to Quadriplegia, Paraplegia and Hemiplegia, two times the Principal Sum, or the Principal Sum if loss of life occurs within 90 days after the date of the Accident.

In no event will indemnity payable for all losses under this part exceed, in the aggregate, two times the Principal Sum as the result of the same Accident.

ACCIDENTAL DENTAL REIMBURSEMENT BENEFIT

If, as the result of Injury to whole or sound teeth (capped or crown teeth will be considered whole or sound) and due to a force or blow external to the mouth, the Insured Person requires treatment within 30 days from the date of the Accident by a legally qualified dentist or dental surgeon, the Company will pay the expenses actually incurred by the Insured Person for such treatment or service within 12 months of the date of the Accident. Payments under this part will be made in accordance with the current Fee Guide for General Practitioners published by the Dental Association in the province or territory of the Insured Person's Residence in Canada or its equivalent, as determined by the Company. In no event will benefits exceed the amount stated in Section 2 of the Schedule as the result of any one Accident.

ACCIDENTAL MEDICAL REIMBURSEMENT BENEFIT

If, by reason of Injury, the Insured Person requires medical treatment within 30 days from the date of the Accident and incurs expenses for any of the following services or supplies, while under the Regular Care and Attendance of a Physician with respect to Items (a) to (i):

- (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 Insured Person's Provincial Hospital Plan and the semi-private accommodation charge (private accommodation charge if recommended by a Physician);
- (d) rental of a wheelchair, iron lung, hospital-type bed, 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 when recommended by a Physician;
- (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 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) the initial purchase of a hearing aid, glass eye or orthopedic prosthesis, subject to a maximum of \$1,500.00;
- (i) x-rays;
- (j) fees for the services of a licensed chiropractor.

The Company will pay the reasonable and customary expenses actually incurred by the Insured Person within 12 months after the date of the Accident, not to exceed in the aggregate the amount stated in Section 2 of the Schedule as a result of any one Accident.

DAY CARE BENEFIT

If an Injury sustained by an Insured Person results in loss of life within 12 months of the date of Accident, the Company will pay the Day Care Benefit stated below for each of the Insured Person's Dependent Children, under 13 years of age who:

- (a) are enrolled in a legally licensed Day Care Centre on the date of such loss; or
- (b) enroll in a legally licensed Day Care Centre within 12 months after the date of death of the Insured Person.

The Day Care Benefit is equal to the reasonable and necessary expenses actually incurred, subject to five percent of the Insured Person's Principal Sum to a maximum of \$5,000.00, for each year the Dependent Child described above is enrolled in a legally licensed Day Care Centre, but not to exceed four years, which must run consecutively, with respect to any one Dependent Child.

The benefit will be paid each year immediately upon receipt of satisfactory proof that the Dependent Child is enrolled in a legally licensed Day Care Centre, but payment will not be made for expenses incurred prior to the death of the Insured Person, nor for room, board or other ordinary living, travelling or clothing expenses.

In the event the Insured Person's Dependent Child does satisfy the requirements indicated above, the Day Care Benefit will be payable to the surviving Spouse if the Spouse has custody of the Dependent Child. If there is no surviving Spouse or the Dependent Child does not reside with the Spouse, benefits payable under this part will then be paid to the Dependent Child's legally appointed guardian.

"Dependent Child" includes a child (or children of a multiple birth) who is born within nine months of the Insured Person's date of loss, provided such child was conceived prior to the date of loss of the Insured Person.

EDUCATION BENEFIT

If an Injury sustained by an Insured Person results in loss of life within 12 months of the date of Accident, the Company will pay the Education Benefit stated below for each of the Insured Person's Dependent Children, who are enrolled as full-time students:

- (a) in a School for Higher Learning above the secondary school level as defined, in the province, territory or country of Residence; or
- (b) at the secondary school level but who enroll as full-time students in a School for Higher Learning within 12 months after the date of death of the Insured Person.

The Education Benefit is equal to the reasonable and necessary expenses actually incurred, subject to five percent of the Insured Person's Principal Sum to a maximum of \$10,000.00, for each year the Dependent Child described above continues his education on a full-time basis in a School for Higher Learning, but not to exceed four years, which must run consecutively, with respect to any one Dependent Child.

The benefit will be paid each year immediately upon receipt of satisfactory proof that the child is enrolled as a full-time student in a School for Higher Learning, but payment will not be made for expenses incurred prior to the death of the Insured Person, nor for room, board or other ordinary living, travelling or clothing expenses.

EDUCATION BENEFIT (Continued...)

In the event the Insured Person's Dependent Child does satisfy the requirements indicated above, such child, if not a minor, will be deemed the beneficiary with respect to benefits payable under this part. In the event such child is a minor, then the Education Benefit will be payable to the surviving Spouse if the Spouse has custody of the Dependent Child. If there is no surviving Spouse or the Dependent Child does not reside with the Spouse, benefits payable under this part will then be paid to the Dependent Child's legally appointed guardian.

If, at the time of loss, none of the Insured Person's Dependent Children satisfy the requirements indicated above, the Company shall pay an additional amount of \$2,500.00 to the designated beneficiary.

FAMILY TRANSPORTATION BENEFIT

If, following an Injury which results in a Loss payable under the part titled "Accidental Death, Dismemberment and Specific Loss Indemnity" of this policy, an Insured Person is confined as an inpatient in a Hospital located from a point of not less than 150 kilometres from his normal place of Residence and such Insured Person is under the Regular Care and Attendance of a Physician, the Company will pay the reasonable and necessary expenses actually incurred by any Member of the Immediate Family for accommodation/lodging in the vicinity of the Hospital where the Insured Person is confined and transportation by the most direct route from the normal place of Residence of the Member of the Immediate Family to the confined Insured Person and return to the normal place of Residence of such Member of the Immediate Family.

Payment will not be made for board or other ordinary living, travelling or clothing expenses. 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.

The maximum amount payable under this part is \$20,000.00 for all such expenses.

FUNERAL EXPENSE BENEFIT

If an Injury sustained by an Insured Person results in loss of life, and indemnity for such loss becomes payable in accordance with the terms of this policy, an additional amount is payable for the reasonable and necessary funeral expenses actually incurred, to a maximum of \$5,000.00.

Benefits payable under this part shall be limited to only one policy in the event this benefit is contained in two or more policies issued to the Policyholder by the Company.

HOME ALTERATION AND VEHICLE MODIFICATION BENEFIT

If an Injury sustained by an Insured Person does not cause loss of life, but results in a Loss for which indemnity becomes payable under the part titled "Accidental Death, Dismemberment and Specific Loss Indemnity", and such Insured Person is subsequently required to use a wheelchair to be ambulatory, the Company will pay the reasonable and necessary expenses actually incurred within three years of the date of the Accident causing such Loss for:

- (a) the cost of alterations to the Insured Person's principal Residence; and/or
- (b) the cost of modifications to one motor Vehicle utilized by the Insured Person, when such modifications are approved by the provincial vehicle licensing authorities where required,

for the purpose of making them wheelchair accessible.

Payment by the Company for the total of all expenses incurred by or for any Insured Person is subject to a maximum of the greater of \$15,000 or 10% of the Insured Person's Principal Sum amount to a maximum of \$50,000.00 as the result of any one Accident.

IDENTIFICATION BENEFIT

If an Injury sustained by an Insured Person results in loss of life, and indemnity for such loss becomes payable in accordance with the terms of this policy, whose body requires identification, the Company will pay the reasonable and necessary expenses actually incurred by a Member of the Immediate Family for:

- (a) lodging and board while en route and/or during the stay in the city or town where the body is located (not to exceed a maximum duration of three consecutive nights);
- (b) transportation by the most direct route from his normal place of Residence to such location and return to his normal place of Residence,

provided the body is located not less than 150 kilometres from the said Member of the Immediate Family's normal place of Residence and the identification of the body is required by the police or a similar law enforcement agency having authority over such matters.

Payment will not be made for ordinary living, travelling or clothing expenses, other than stated above. 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.

The maximum amount payable under this part is \$20,000.00 for all such expenses.

REHABILITATION BENEFIT

If an Injury sustained by an Insured Person results in a Loss payable under the part titled "Accidental Death, Dismemberment and Specific Loss Indemnity", and such Injury requires that the Insured Person undergo special training in order to be qualified to engage in a special occupation in which he would not have engaged except for such Injury, the Company will pay the reasonable and necessary expense incurred for such training by the Insured Person within three years of the date of the Accident, subject to a maximum of \$20,000.00 as the result of any one Accident.

Payment will not be made for room, board or other ordinary living, travelling or clothing expenses.

REPATRIATION BENEFIT

If an Injury sustained by an Insured Person results in loss of life and indemnity becomes payable in accordance with the terms of this policy, the Company will pay the reasonable and necessary expenses actually incurred for the transportation of the body to the city of Residence, including the preparation of the body for such transportation, subject to a maximum of \$20,000.00.

SEAT BELT BENEFIT

If, due to a vehicular Accident, an Injury sustained by an Insured Person results in a loss payable under the part titled "Accidental Death, Dismemberment and Specific Loss Indemnity", the Insured Person's amount of Principal Sum will be increased by 10%, subject to a maximum of \$25,000.00 if, at the time of the Accident, the Insured Person was driving or riding in a Vehicle and wearing a properly fastened Seat Belt.

The driver of the Vehicle must hold a current and valid driver's license of a rating authorizing him to operate such Vehicle and neither be intoxicated nor under the influence of drugs, unless such drugs are taken as prescribed by a Physician, at the time of the Accident. "Intoxicated" and "under the influence of drugs" are as defined by the local jurisdiction where the Accident occurs.

Due proof of Seat Belt use must be provided as part of the written proof of Loss.

SPOUSAL RETRAINING BENEFIT

If an Injury sustained by an Insured Person results in loss of life and indemnity becomes payable in accordance with the terms of this policy, the Company will pay the reasonable and necessary expenses actually incurred within three years from the date of such Accident by the Spouse of the Insured Person who engages in a formal occupational training program in order to become specifically qualified for active employment in an occupation for which he would not otherwise have sufficient qualifications, not to exceed in the aggregate \$20,000.00 for all such expenses. Payment will not be made for room, board, or other ordinary living, travelling or clothing expenses.

In the event the Insured Person's Spouse does satisfy the requirements indicated above, such Spouse will be deemed the beneficiary with respect to benefits payable under this part.

TUTORIAL EXPENSE

If Injury shall, within 100 days from the date of the Accident, totally disable and confine the Insured Person to his Residence or Hospital for a period in excess of 30 consecutive school days, the Company will pay, from the first day the actual expense is incurred, for the tutorial services of a teacher qualified to hold a teaching position under the standards set down by the Policyholder for grade attained by the Insured Person at a rate not to exceed \$20.00 per hour or the amount stated in Section 2 of the Schedule.

WEEKLY ACCIDENT INDEMNITY

When, commencing within 30 days of the date of the Accident, Injury wholly and continuously disables and prevents an Insured Person from performing the substantial and material duties of His Occupation, the Company will pay the Weekly Accident Indemnity stated in Section 2 of the Schedule for the period the Insured Person is so disabled and under the Regular Care and Attendance of a legally qualified Physician or surgeon, other than himself, commencing the eighth day of Disability not to exceed twenty-six consecutive weeks as the result of any one Accident.

LIMITED AIR TRAVEL COVERAGE

Insurance provided under this policy 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, this policy 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.

EXPOSURE AND DISAPPEARANCE

If, as the result of an Accident, an Insured Person is unavoidably exposed to the elements and if, as a result of such exposure and within 12 months after the date of the Accident, the Insured Person suffers a loss for which indemnity would otherwise have been payable hereunder, such loss will be deemed to be the result of Injury.

Where, due to the accidental wrecking, sinking or disappearance of a conveyance in which an Insured Person was riding, the Insured Person disappears, and if the body of the Insured Person is not found within 12 months after the date of such wrecking, sinking or disappearance, it will be presumed, subject to there being no evidence to the contrary and subject to all other terms and conditions of the policy, that the Insured Person suffered loss of life as a result of Injury.

AGGREGATE LIMIT OF INDEMNITY

The aggregate limit of indemnity stated in Section 3 of the Schedule is the limit of indemnity for which the Company will be liable under this policy for all losses arising out of any one Accident. In the event said limit of indemnity for any one Accident is insufficient to pay the full amount of indemnity for each Insured Person, then the amount payable for each Insured Person will be in the proportion that the limit of indemnity for any one Accident bears to the total amount of insurance that would have been payable except for such limit of indemnity.

EXCLUSIONS AND LIMITATIONS

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

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

Nor does this policy cover expenses incurred:

- (e) for sickness or disease, either as a cause or effect;
- (f) for the purchase, repair or replacement of eyeglasses or contact lenses, or prescriptions therefor;
- (g) for charges of masseur;
- (h) for x-rays, repairs or replacement of pre-existing dentures, fillings or crowns, except as provided in the part titled "Accidental Dental Reimbursement Benefit";
- (i) by an Insured Person who is not covered under any Federal or Provincial Hospital Plan.

This policy is subject to and will not contravene any Federal or Provincial statutory requirement with respect to hospital and/or medical plans. Benefits will be reduced under the parts titled "Accidental Medical Reimbursement Benefit" and "Accidental Dental Reimbursement Benefit" of this policy by any amount paid or payable under any other policy providing similar reimbursement expenses.

EFFECTIVE DATE OF INSURANCE OF AN INSURED PERSON

Each person who is eligible for insurance under this policy shall become an Insured Person on the later of:

- (a) the effective date of this policy;
- (b) the date he becomes an eligible person, as specified in Section 1 of the Schedule.

TERMINATION OF INSURANCE OF AN INSURED PERSON

Insurance with respect to each Insured Person will immediately terminate on the earliest of the following dates:

- (a) the date this policy is terminated;
- (b) the premium due date if the Policyholder fails to pay the required premium for an Insured Person, except as the result of an inadvertent error;
- (c) the date an Insured Person reaches 22 years of age for Class 1, 70 years of age for Class 2, 80 years of age for Class 3 and 85 years of age for Class 4;
- (d) the date an Insured Person ceases to be associated with the Policyholder in a capacity making such person eligible for insurance hereunder.

TERMINATION OF POLICY

This policy may be terminated by the Company or by the Policyholder by one giving to the other 30 days' notice in writing of such intention to terminate, delivered personally or sent by registered mail to the latest address of the Company or the Policyholder, as the case may be and thereupon, this policy will cease on the expiration of such 30 days.

This policy may be terminated by the Company forthwith provided such cancellation is given in writing, delivered personally or sent by registered mail to the latest address of the Policyholder in the event of failure by the Policyholder to remit premiums to the Company as and when due.

INADVERTENT ERROR

The insurance of an Insured Person will not be prejudiced by the failure on the part of the Policyholder to transmit reports or comply with any of the provisions of this policy when such failure is due to inadvertent error or clerical mistake. This clause does not apply to claims reporting. Claims must be reported within the time frame specified in "Notice and Proof of Claim" under the part titled "General Provisions".

GENERAL PROVISIONS

THE CONTRACT

This policy, including the endorsements, insertions, riders or attachments, if any, and the application for the contract if attached to the policy, constitutes the entire contract and no agent has authority to change the contract or waive any of its provisions.

CONFIDENTIALITY OF INFORMATION

The Policyholder acknowledges that all information provided to the Company in connection with an application for insurance or insurance coverage of a person will be treated as confidential.

The Company and the Policyholder are obliged to comply with legislation relating to the collection, retention, use and disclosure of personal information about policyholders, certificate holders and personnel. The Policyholder acknowledges receipt of the Company's Privacy Policy ("the Privacy Policy") attached as Appendix 1, setting out the Company's standards in dealing with personal information and agrees to manage any personal information held by it on behalf of the Company in a manner consistent with the Privacy Policy. Additionally, the Policyholder agrees to abide by any privacy procedures relevant to it provided by the Company from time to time. Such procedures are intended to implement the principles set out in the Privacy Policy.

WAIVER

The Company will be deemed not to have waived any conditions of this contract, either in whole or in part, unless the conduct of its employees or authorized representative reasonably causes the Insured Person to believe a requirement is excused, or the waiver is clearly expressed in writing and signed by a duly authorized officer of the Company.

GENERAL PROVISIONS (Continued...)

POLICY REPLACEMENT – BENEFICIARY

In the situation where this policy replaces an existing policy issued to the Policyholder, the beneficiary designation recorded under the replaced policy will be deemed to be valid and of full force and effect under this policy until changed in writing by the Insured Person.

NOTICE AND PROOF OF CLAIM

The Insured Person or his agent, or a beneficiary entitled to make a claim, or his agent will

- (a) give written notice of claim to the Company,
 - (i) by delivery thereof, or by sending it by registered mail to the Division Headquarters or chief agency of the Company in the province; or
 - (ii) by delivery thereof to an authorized agent of the Company in the province,
not later than 30 days from the date of the Accident,
- (b) within 90 days from the date of the Accident for which the claim is made, furnish to the Company such proof of claim as is reasonably possible in the circumstances of the happening of the Accident, and the loss occasioned thereby, and
- (c) if so required by the Company, furnish a satisfactory certificate as to the cause or nature of the Accident for which the claim may be made under the contract.

FAILURE TO GIVE NOTICE OR PROOF

Failure to give notice of claim or furnish proof of claim within the time prescribed does not invalidate the claim if the notice or proof is given or furnished as soon as reasonably possible, and in no event later than 12 months from the date of the Accident, if it is shown that it was not reasonably possible to give notice or furnish proof within the time so prescribed.

CLAIM FORMS

The Company, upon receipt of a written notice of claim, will furnish to the claimant such forms as are usually furnished by it for filing proofs of loss. If such forms are not furnished within 15 days after the giving of such notice, the claimant will be deemed to have complied with the requirements of this policy as to proof of loss upon submitting, within the time fixed in this policy for filing proofs of loss, written proof covering the occurrence, the character and the extent of the loss for which claim is made.

TIME OF PAYMENT OF CLAIMS

Indemnities payable under this policy for any loss other than loss for which this policy provides any periodic payment will be paid immediately upon receipt of due written proof of such loss. Subject to due written proof of loss, all accrued indemnities for loss for which this policy provides periodic payment will be paid at the expiration of each four weeks during the continuance of the period for which the Company is liable, and any balance remaining unpaid upon termination of liability will be paid immediately upon receipt of due written proof.

PAYMENT OF CLAIMS

All monies payable under this policy by the Company will be paid in the currency in which premiums are paid.

GENERAL PROVISIONS (Continued...)

PHYSICAL EXAMINATION AND AUTOPSY

The Company at its own expense will have the right and opportunity to examine the person of any individual whose Injury is the basis of claim when and as often as it may reasonably require during the pendency of a claim hereunder and to make an autopsy in case of death where it is not forbidden by law.

INSPECTION OF RECORDS

The Policyholder will, from time to time, whenever requested by the Company during the term of this policy and for 12 months after its expiration, permit the Company to inspect all records of the Policyholder relating to this policy and all persons insured hereunder.

LEGAL ACTION

No action at law or in equity will be brought to recover on this policy prior to the expiration of 60 days after written proof of loss has been furnished in accordance with the requirements of this policy. No such action will be brought after the expiration of 12 months (two years in Alberta and British Columbia, and three years in Quebec) after the time written proof of loss is required to be furnished.

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.

SCHEDULE

Section 1 - Insured Persons – The following persons or categories of persons are Insured Persons under this policy.

**Classification
of
Insured Persons**

Name or Category of Insured Persons

Class 1	All cadets and visiting cadets of the Policyholder, ages 12 to 22.
Class 2	All full-time employees, members of national committees, directors and officers of the League, volunteers, escorts and members of the Advisory Board of the Policyholder, under age 70.
Class 3	All full-time employees, members of national committees, directors and officers of the League, volunteers, escorts and members of the Advisory Board of the Policyholder, age 70 and over, but under age 80.
Class 4	All full-time employees, members of national committees, directors and officers of the League, volunteers, escorts and members of the Advisory Board of the Policyholder, age 80 and over, but under age 85.

Section 2 – Benefits

Class 1	Principal Sum	\$10,000.00
	Accidental Dental Reimbursement Benefit	\$2,000.00
	Accidental Medical Reimbursement Benefit	\$10,000.00
	Tutorial Expense	\$500.00
	Weekly Accident Indemnity	\$35.00 per week
Class 2	Principal Sum	\$50,000.00
	Accidental Dental Reimbursement Benefit	\$2,000.00
	Accidental Medical Reimbursement Benefit	\$10,000.00
Classes 3 and 4	Principal Sum	\$5,000.00
	Accidental Dental Reimbursement Benefit	\$2,000.00
	Accidental Medical Reimbursement Benefit	\$10,000.00

SCHEDULE

Section 3 - Aggregate Limit of Indemnity – \$2,000,000.00 per any one Accident.

Section 4 - Premium – The premium for the current term of this policy is \$8,960.90.

Section 5 - Description of Hazards

The hazards against which insurance is provided under and subject to the provisions of this policy for each classification of Insured Persons are defined as follows:

- Class 1 Injury sustained by the Insured Person while participating in any event or activity sponsored and/or supervised by the Policyholder and/or Department of National Defense, including travelling directly to or from the Insured Person's Residence and the Policyholder's premises or location of the event or activity.
- Such anticipated journey to a Policyholder sponsored and/or supervised event or activity, shall be deemed to have commenced when the Insured Person leaves his Residence or place of regular employment for the purpose of going on such journey, whichever last occurs, and shall continue until such time as he returns to his Residence or place of regular employment, whichever first occurs.
- The term "travelling directly", as used in this policy means any travel which would take the Insured Person directly to or from his or her Residence and the Policyholder's premises or location of the event or activity along the most normal and reasonable route without delay or stopover.
- Classes 2 to 4 Injury sustained by the Insured Person during the course of any bonafide trip made by the Insured Person and while participating in any event or activity sponsored and/or supervised by the Policyholder while on the business of the Policyholder.
- Such trip shall be deemed to have commenced when the Insured Person leaves his Residence or place of regular employment for the purpose of going on such trip, whichever last occurs, and shall continue until such time as he returns to his Residence or place of regular employment, whichever first occurs.
- The term "while on the business of the Policyholder" as used herein means while on assignment by or at the direction of the Policyholder for the purpose of furthering the business of the Policyholder, provided that Injury sustained during the course of everyday travel to or from work and bonafide leave of absence or vacation shall not be deemed to be sustained while on the business of the Policyholder.

SCHEDULE

Section 6 – Beneficiary

In the event the Insured Person is a minor, all indemnities payable will be payable to the custodial guardian or parent or if there is none, to the legally appointed guardian of the Insured Person.

If the Insured Person is not a minor, loss of life of an Insured Person is payable to the estate of the Insured Person. All other indemnities will be paid to the Insured Person, with the exception of indemnities payable under the following parts:

Day Care Benefit
Education Benefit
Family Transportation Benefit
Funeral Expense Benefit

Identification Benefit
Repatriation Benefit
Spousal Retraining Benefit

Appendix 1

Privacy Policy for The Industrial Alliance Group

The Industrial Alliance Group is composed of Industrial Alliance Insurance and Financial Services Inc. and its subsidiaries (the “Company”). The Company is committed to protecting the Company’s clients’, employees’ and representatives’ (the “Individual’s”) privacy, and to ensuring the confidentiality of the personal information provided to it in the course of the Company’s business.

The Company’s Privacy Policy sets out the Company’s standards for collecting, using, disclosing and storing the Individual’s personal information. The Company’s Privacy Policy also explains how the Company safeguards the Individual’s personal information and the Individual’s right to access that information.

Personal Information

Personal Information is any information about an individual that identifies him or her, such as financial, lifestyle or health information, but not their name, title or business address, telephone or email.

Personal information has to be protected regardless of its characteristics or its form, whether written, graphic, audio, visual, computerized or any other form.

Purpose of Information Collection

Collecting information about the Individual is necessary in order for the Company to provide the Individual with high quality services. The nature and sensitivity of the information the Company collects about the Individual varies according to the services the Company provides the Individual, and to legal requirements imposed on it (such as the Individual’s social insurance number, where investment income is generated by a chosen product).

The purposes for which the Company collects personal information about the Individual are identified at or before the time of collection. For example, information may be collected while submitting an application, opening an account, or submitting a claim.

Purposes for collecting information generally include providing products or services requested, confirming the Individual’s identity, protecting against fraud, or dealing with matters concerning the relationship between the Company and the Individual.

Any questions and concerns the Individual may have regarding the purposes for collecting information may be directed to us at the address provided below.

Consent

When the Company collects personal information from the Individual, the Company obtains the Individual’s consent to use the information for the purposes collected. The Company will obtain the Individual’s consent for any additional use or collection, or if the purpose of using the information is changed.

The Company generally seeks the Individual’s express written consent in order to collect, use or disclose personal information. Where appropriate, for less sensitive information, the Company may accept the Individual’s verbal consent. Occasionally, the Company may imply consent where the Company can infer consent from the Individual’s action or inaction.

Appendix 1 (Continued)

Consent (Continued)

Consent must be given by the Individual or the Individual's authorized representative such as a legal guardian or a person having power of attorney.

The Individual may withdraw the Individual's consent at any time, subject to legal or contractual restrictions (for example, the Individual's right to withdraw consent is necessarily limited where the Company needs information to extend a loan against the value of a policy issued by it). The Company will inform the Individual of the consequences of such withdrawal, including the possibility that the Company may not be able to provide a product or process a request. If the Individual chooses not to consent, the Company will record the decision in the Company's file.

In limited circumstances, the Company has the right (or obligation) to collect, use or disclose personal information without the Individual's knowledge and consent. This occurs when legal, medical, or security reasons may make it impossible or impractical to seek consent. When information is being collected for the investigation of a potential breach of contract, the prevention or detection of fraud, or for law enforcement purposes, seeking consent might defeat the purpose of the information collection. Similarly, seeking consent may be impossible or inappropriate when the Individual is a minor, seriously ill or otherwise incapacitated.

Limits to Collection, Use and Disclosure

The Company limits the collection of the Individual's personal information to what the Company needs in relation to the purposes identified to the Individual.

The Company collects the information directly from the Individual unless the Individual allows the Company to collect information from a third party or in accordance with the law.

The Company limits the use of the Individual's personal information to the purposes the Company has identified to the Individual. This means that the Company cannot use the Individual's personal information for other purposes without the Individual's consent, except as required by law.

The Company cannot disclose the Individual's personal information to anyone except with the Individual's consent or as required by law.

The Individual's personal information is only accessible to certain authorized persons, and only to the extent necessary to perform their duties.

The Individual has the right to know, on request to whom the information was disclosed. Only in rare instances is the Company prevented by law from making such disclosure. The Company maintains accurate records, recording to whom it discloses personal information and in what circumstances the information was disclosed.

The Company will occasionally share the Individual's personal information with service providers or agents to ensure the proper administration of products or to provide an Individual with the services the Individual requires. These service providers or agents must agree to comply with privacy legislation before receiving any personal information.

Appendix 1 (Continued)

Limits to Collection, Use and Disclosure (Continued)

In certain circumstances, the Company may use service providers outside Canada, including the United States. The Company is responsible for the service provider's compliance with the Company's Privacy Policy and will ensure that the level of protection of personal information is comparable to that provided by the Company. Any questions concerning the collection, transfer or use of personal information outside Canada can be forwarded to the Privacy Officer at the address provided below.

Retention

The Company only retains the Individual's personal information for as long as needed for the purpose it was collected. The Company must destroy this information in accordance with the law and the Company's file retention guidelines. When the Company destroys the Individual's personal information, the Company makes sure that confidentiality is secured and that no unauthorized person can access the information during the destruction process.

Client List

The Company may establish a list of clients (names, addresses and telephone numbers) and share this list with other companies of the Industrial Alliance Group. The purpose of this list is to allow us to better serve the Individual by offering relevant and available products and services. The Individual may request that the Individual's name be removed from such a list by writing to the Privacy Officer at the address provided below.

The Company does not sell client lists to third parties.

Accuracy

The Company makes every possible effort to ensure that the Individual's personal information is as accurate and complete as necessary for the purposes it is collected, used, or disclosed.

Accountability

The Company is responsible for the Individual's personal information in the Company's possession or control, including information that may be transferred by the Company to third parties for processing. The Company requires such third parties to keep personal information under strict standards of privacy and protection.

The Company adheres to legislated and self-imposed rules, aimed to safeguard the Individual's privacy. The rules are established by this Privacy Policy, the Code of Business Conduct (applicable to directors, officers and employees), Market Conduct Standards (applicable to agents and brokers) as well as insurance industry guidelines and applicable law.

The Company's staff is trained on these processes and procedures and is provided with information about privacy laws.

Safeguards

The Company has implemented and continues to implement rigorous safeguards so that the Individual's personal information remains strictly confidential and is protected against loss or theft, as well as unauthorized access, disclosure, copying, use, or modification.

Appendix 1 (Continued)

Safeguards (Continued)

Protection methods include organizational measures such as requiring security clearances and limiting access to a “need-to-know” basis, physical measures (e.g. building access cards for employees, visitor registration and identification cards, off-site backups and archiving), and technological measures such as the use of password and encryption (e.g. the use of routinely changing passwords, firewalls and segmented operator access).

Request for Access to Information and Amendments

The Individual has the right to be informed whether the Company holds personal information about the Individual and to see that information. The Individual also has the right to enquire as to how the Company collected the Individual’s information, how the Company used it and to whom it may have been disclosed.

This information will be provided to the Individual within a reasonable time from the date the Company receives the Individual’s written request. The Company may charge a reasonable fee for processing the Individual’s request.

In certain limited and specific circumstances, the Company may refuse to provide to the Individual the requested information. Exceptions to the Individual’s access right can include information that is prohibitively costly to provide, information that contains references to other individuals, information that cannot be disclosed for legal, security or commercial proprietary reasons, information that has been obtained in the course of an investigation of a potential breach of contract or fraud, and information that is subject to solicitor-client or litigation privilege.

In cases where the Company holds medical information about the Individual, the Company may refuse to provide the Individual with direct access to this information and may instead request that a health care professional be designated to provide the information to the Individual.

The Individual may challenge the accuracy and completeness of the Individual’s personal information. The Company will respond to an amendment request within a reasonable time.

Any request for access to information or request for amendment must be sent to the following address:

Privacy Officer
Industrial Alliance Insurance and Financial Services Inc.
2165 Broadway West, PO Box 5900, Vancouver, BC, V6B 5H6
Toll free number: 1-855-737-7887
Email: PrivacyOfficer@ia.ca

Complaints and Concerns

The Company’s employees and representatives are trained to respond to the Individual’s questions or concerns about personal information. Should the Individual be unsatisfied with the Company’s employee’s or representative’s response, the Individual may contact the Privacy Officer at the address mentioned above.

A complaint concerning the protection of personal information should be addressed to the Privacy Officer at the address provided above.