

This document presents a summary of the main types of cover and exclusions for the policy. It does not take into account your specific requests and requirements. You will find the complete information on this product in the pre-contractual and contractual documentation.

What type of insurance is this?

The PUY DU FOU cover is a temporary policy which allows any person who has booked an entry ticket to the Puy du Fou Park either with or without any other service, to benefit from insurance cover in the event of cancellation, delayed return or curtailment of the holiday.



What is insured?

- ✓ **Cancellation**
Reimbursement of the price of the entry ticket to the park and associated bookings (limit: €1,000 per person for individual or group policies and €10,000 per order for individual policies)
- ✓ **Holiday curtailment**
Compensation proportional to the number of days not used (limit: €6,500 per Insured Person and €32,000 per insured event)
- ✓ **Delayed return**
Reimbursement of additional costs in the event of a trip extension
Reimbursement of additional transport costs



What is not insured?

- ✗ Individuals who do not reside in Europe



Are there any exclusions to the cover?

- ! Damage subsequent to intentional misconduct on the part of the Insured Person, suicide or attempted suicide of the Insured Person
- ! Damage subsequent to the consumption of alcohol and/or ingestion by the Insured Person of non-medically prescribed medication, drugs or narcotics as listed in the French Public Health Code
- ! Damage resulting from war, whether civil or foreign, acts of terrorism, riots, civil unrest, coups d'état, taking of hostages, or strikes
- ! the consequences, after-effects, complications or aggravations of an Illness or Accidental Bodily Injury, which were diagnosed before the insured service was booked
- ! Climatic, meteorological or natural events, natural disasters
- ! Unless otherwise stated in the guarantees, the consequences of the epidemic or pandemic
- ! Consequences of local health situations, pollution, meteorological, climatic or natural disasters

The types of cover marked with a tick (✓) are automatically included in the policy.



Where am I covered?

- ✓ The covers apply in France



What are my obligations?

Your insurance policy may be invalidated or cover denied if you fail to comply with the following obligations:

- ✓ **When taking out the insurance policy**
Declare the risk to be insured in good faith so as to enable the Insurer to assess the risks it is covering.
Pay the premium indicated when taking out the insurance policy.
- ✓ **During the term of the policy**
Declare any new circumstances that may increase the insured risks or create new risks.
- ✓ **In the event of a claim**
Declare any loss that may invoke one of the types of cover under the conditions and within the time periods established and provide any document that may be useful in assessing the loss.
Inform the Insurer of any cover that may have been taken out for the same risks, either in full or in part, with other insurers, as well as any reimbursement received following a claim.



When and how should payments be made?

The premium must be paid on the day the policy is taken out.
The payment can be made by any means to the Authorised Organisation or Intermediary.



When does the cover start and end?

The policy takes effect at 00:00 (start of day) on the day after payment of the premium and ends at 24:00 (end of day) on the day of the last insured service.



How can I terminate the policy?

As this is a temporary insurance policy, the Insured Person cannot terminate it.



NOTICE OF INFORMATION

Policy No. 303 882

PUYDUFOU.

Allianz  **Travel**

NOTICE OF INFORMATION DEEMED TO CONSTITUTE GENERAL TERMS AND CONDITIONS FOR POLICY NO. 303 882

Dear Customer,

Taking account of the type of service(s) you are buying and the information you have sent us, we recommend that you take out this insurance policy. This policy consists of the General Terms and Conditions presented below, supplemented by the sales contract for the insured service, which you receive when you take out this policy.

Before taking out this insurance policy, please read this Notice of Information and the General Terms and Conditions carefully. They outline your rights and obligations, as well as the Insurer's rights and obligations, and are likely to answer any questions that you may have.

WHO IS THE INSURER?

AWP P&C, an SA [corporation] with a share capital of €17,287,285.00 registered with the Bobigny Register of Companies under No. 519 490 080, and with its registered office at: 7 rue Dora Maar - 93400 Saint-Ouen.

A private company governed by the French Insurance Code.

WHO IS THIS POLICY AIMED AT?

This policy is aimed at anyone who has booked an entry ticket for Puy du Fou, either with or without any other service, on the (www.puydufou.com) website or through the Puy du Fou booking office, subject to the terms and conditions below.

WHAT ARE THE CONDITIONS FOR BENEFITING FROM THIS POLICY?

You must have your Home in Europe.

The policy must be taken out on the same day as the purchase of the entry ticket to the Park and any associated bookings. It may also be taken out no later than seventy-two (72) hours following the day of purchase of the entry ticket to the Park and any associated bookings, provided that the date of entry to the Park and associated bookings is more than seven (7) business days from the date this policy was taken out.

WHAT IS THE COMMENCEMENT DATE AND DURATION OF MY POLICY?

The policy is valid from the date it is taken out for any ticket sold by the approved Organisation or Intermediary with which this policy is taken out. The types of cover apply according to the terms and conditions provided for in the 'Administrative Provisions'.

WHICH TYPES OF COVER ARE PROVIDED IN THE POLICY?

- The types of cover listed below are those which are shown in your sales agreement for the insured service and for which you have paid the corresponding premium.
- To find out the payment amounts and limits and the excesses relating to these covers, please refer to the Cover Table. This table also includes a list of general exclusions, along with the specific exclusions for each type of cover.

KEY ELEMENTS

- You may or may not have cancellation rights after taking out this insurance policy. The terms and conditions for exercising this option are detailed in the 'Administrative Provisions' of the General Terms and Conditions in Article 3, 'Cancellation option'.
- To avoid multi-insurance, in accordance with Article L112-10 of the French Insurance Code:

Please check that you do not already have cover protecting you for one of the risks covered under the new policy. If you are already covered, you have the right to cancel this policy within fourteen calendar days from signing the contract, without incurring any fees or penalties, provided that all of the following conditions are met:

- you have taken out this policy for non-professional purposes;
- this policy accompanies the purchase of goods or services sold by a supplier;
- you prove that you are already covered for one of the risks provided for in the new policy;
- the policy you wish to cancel has not been fully implemented;
- you have not submitted any claims covered by this policy.

In that instance, you can exercise your right to cancel the policy by letter or any other durable medium sent to the insurer of the new policy, along with a document proving that you already have cover protecting you against one of the risks covered in the new policy. The insurer will be required to reimburse you the premium that you have paid within thirty days of you cancelling it.

If you wish to cancel your policy but do not satisfy all of the conditions above, please check the terms and conditions for cancellation set out in your policy under Article 3 of the Administrative Provisions, "Cancellation option".

- Service quality and customer satisfaction are a priority for us. If, however, our services have not been completely satisfactory, you can contact us in accordance with the terms provided for in the "Administrative Provisions" of the General Terms and Conditions in Article 12, "Complaints handling procedures".

Compensation request

- ▶ To register your claim immediately, contact us on:
<https://indemnisat.alianz-travel.fr>
- ▶ If you do not have Internet access, contact us (Mainland France time zone):
on +33 (0)1 42 99 03 95 (standard rate call)
Monday to Friday between 9:00am and 6:00pm

The policy is drawn up in French and is subject to French law. The types of cover in the policy are governed by the French Insurance Code.

GENERAL TERMS AND CONDITIONS FOR POLICY NO. 303 882

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DEFINITIONS COMMON TO ALL TYPES OF COVER

The terms starting with a capital letter in this policy are defined either in this chapter, or at the beginning of the description for each type of cover.

ACCIDENT: any sudden and unforeseen event, external to the victim or the damaged item, which is the cause of the damage.

ACCIDENTAL BODILY INJURY: any unintentional bodily injury caused by the sudden action of an external cause, confirmed by a Doctor.

ASSAULT: any physical assault or threat of physical assault from a Third Party.

INSURED PERSON(S): the person(s) featured in the sales agreement for the insured service provided that their Home is situated in Europe.

INSURER: AWP P&C, that is, the Insurer with which this insurance policy was taken out. Assistance services are carried out by AWP France SAS, hereinafter referred to under the commercial name "Allianz Travel".

PARK ENTRY TICKETS: entry to the Puy du Fou Park and/or Cinéscénie.

NATURAL DISASTER: an event of natural origin caused by the abnormal intensity of a natural phenomenon, and recognised as such by the authorities of the country in which it occurs.

DE FACTO SPOUSE: two individuals who are neither married nor legally registered partners, but who have supporting documents to prove that they live at the same place of residence (a cohabitation certificate or, should they not have one, housing tax documentation, a bill for electricity, gas, water, insurance, or a rent receipt, etc.); and that they lived under the same roof from the date on which the policy is taken out and at the time of the Insured Event.

DEPARTURE: the date and time at which the services which have been booked and insured are intended to begin.

HOME: usual place of residence in Europe which determines the Insured Person's exercise of their civil rights.

BREAK-IN: forcing, damage or destruction of an anti-theft device.

EPIDEMIC: a contagious disease whose spread constitutes an epidemic according to the World Health Organization (WHO) or the competent health authority of the Home country of the Insured Person.

EUROPE: territories of the Member States of the European Union, located in geographical Europe, as well as the following territories and countries: Guadeloupe, Guyana, Martinique, Réunion, Saint-Barthélemy (French part), Liechtenstein, the Principalities of Monaco and Andorra, Saint-Martin (French part), Switzerland, the Vatican.

The Azores, the Canary Islands and Madeira are not included in this definition.

INSURED EVENT: any event giving entitlement to cover and set out in each type of cover in this policy.

FRANCE: Mainland France (including Corsica), Guadeloupe, Guyana, Martinique, Reunion, Saint-Martin (French part) and Saint Barthélemy.

MAINLAND FRANCE: European territory belonging to France (including the islands located in the Atlantic Ocean, the English Channel and the Mediterranean), **except for any French overseas department, region, local authority, territory and country.**

CIVIL WAR: an armed struggle within a State between different groups defined by their ethnic, religious, community or ideological identity, or between at least one of these groups and the regular armed forces of that State.

FOREIGN WAR: an armed conflict, whether declared or not, between one State and one or more other States or an irregular external armed force, on the grounds of, for example, a geographical, political, economic, racial, religious or environmental dispute.

LIMIT PER INSURED EVENT: maximum amount covered for an event giving entitlement to cover, irrespective of the number of Insured Persons in this policy.

DISPUTE: conflict between the Insured Person and a Third Party resulting in enforcement of a right, fighting of a claim or defence before any court.

ILLNESS: any change in the state of health of a person confirmed by a Doctor.

DOCTOR: any person who holds a medical qualification that is legally recognised in the country in which they usually carry out their professional activity.

APPROVED ORGANISATION OR INTERMEDIARY: distributor of the entry ticket to the Park and any associated bookings.

COUNTRIES NOT COVERED: An updated list of all Countries Not Covered is available on the Allianz Travel website, at the following address: <http://paysexclus.votreassistance.fr>

PANDEMIC: an epidemic which the World Health Organization (WHO) or the competent health authority of the Home country of the Insured Person has declared as a pandemic.

INSURANCE PERIOD: period of validity of this policy.

PERIOD OF LIMITATION: period beyond which any claim or action is no longer admissible.

QUARANTINE: strict isolation imposed upon a person who is not ill but who has been exposed to, or is likely to have been exposed to a contagious disease whose spread has been declared as an Epidemic or Pandemic, as ordered by a competent authority.

Lockdowns which apply more broadly to part or all of a population or geographical area are excluded.

ASSOCIATED BOOKINGS: bookings that have been prepaid when booking a trip to the Puy du Fou Park (such as hotels and/or catering).

COVER THRESHOLD: duration, amount or minimum percentage which triggers the Insurer's assistance or the cover being implemented.

HOLIDAY: Entry ticket and associated Bookings provided for within the period of validity of the policy.

POLICYHOLDER: the signatory of the sales contract for the insured service, who thereby undertakes to pay the corresponding insurance premium.

SHOW: any fun, cultural or sporting event.

SUBROGATION: process by which the Insurer replaces the Insured Person in their rights and legal actions against any party liable for their damages in order to obtain reimbursement of the sums that the Insurer has paid to the Insured Person following an Insured Event.

THIRD PARTY: any individual or legal entity except for the Insured Person.

AGGRAVATED THEFT: theft committed involving a Break-in or an Assault, documented by a detailed crime report.

POLICY TERRITORY

The types of cover apply in France for the entry ticket to the Puy du Fou Park and associated bookings purchased on the website of the park or from the Puy du Fou booking office.

COVER TABLE

INSURED EVENTS	COVER AMOUNTS AND LIMITS	EXCESSES OR COVER THRESHOLDS
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CANCELLATION

<ul style="list-style-type: none"> • Following the occurrence of an Insured Event 	Reimbursement of the price of the entry ticket to the park and associated bookings (limit: €1,000 per insured person (individual or group policy)). This limit is increased to €10,000 per order for individual policies.	N/A
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HOLIDAY CURTAILMENT

<ul style="list-style-type: none"> • Holiday <ul style="list-style-type: none"> - when the holiday is curtailed by one of the Insured Events 	Payment of compensation proportional to the number of days of the Holiday not used, within the following limits: <ul style="list-style-type: none"> • €6,500 per insured person, and • €32,000 per Insured Event for all persons insured under this policy 	N/A
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DELAYED RETURN

HOLIDAY EXTENSION

<ul style="list-style-type: none"> • Following the occurrence of an Insured Event: <ul style="list-style-type: none"> - Illness linked to an Epidemic/a Pandemic - Quarantine 	Reimbursement of additional expenses incurred after the Holiday is extended, up to the following limits: <u>WITH SUPPORTING DOCUMENTS for these expenses</u> €150 per day and per Insured Person for a maximum period of 14 consecutive days, i.e. a maximum of €2,100 OR <u>WITHOUT SUPPORTING DOCUMENTS for these expenses</u> €50 per day and per Insured Person for a maximum period of 14 consecutive days, i.e. a maximum of €700	Cover threshold: original Departure time delayed by more than 12 hours (appearing on the travel ticket or on the notification issued by the transportation operator)
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REDIRECTION TO THE ORIGINAL RETURN LOCATION

<ul style="list-style-type: none"> • Following the occurrence of an Insured Event 	Reimbursement of additional transport for getting to the originally intended return location, up to a limit of: €500 per Insured Person and per Insured Event	N/A
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GENERAL EXCLUSIONS

In addition to the specific exclusions shown for each type of cover and any exclusions shown in the definitions, the consequences of the following circumstances and events are not insured:

1. damage of any kind determined, caused or instigated by the Insured Person or with their complicity, or following gross negligence or wilful misconduct by the Insured Person (Article L113-1(2) of the French Insurance Code), except in cases of self-defence or assistance to a person in danger;
2. the Insured Person's criminal convictions;
3. suicide or attempted suicide by the Insured Person;
4. damage following:
 - alcohol consumption by the Insured Person and/or,
 - use by the Insured Person of medicine, drugs or any non-medically prescribed narcotic substance listed in the French Public Health Code;
5. damage resulting from War, whether Civil or Foreign, acts of terrorism, riots, civil unrest, coups d'état, hostage-taking, or strikes, unless otherwise provided for in the cover;
6. civilian or military use of nuclear reactions, namely, transformation of an atomic nucleus, transportation and processing radioactive waste, use of a radioactive source or body, exposure to ionising radiation, contamination of the environment by radioactive agents, or an accident or malfunction occurring on a site where atomic-nucleus transformations occur;
7. incidents for which the organiser of the Show may be liable under Title I of French statute no. 2009-888 dated 22 July 2009 in relation to the development and modernisation of tourist services, or the transportation company, unless otherwise stated in the cover;
8. cancellation of a show or lack of access to the place mentioned on the insured entry Ticket, attributable to the responsibility of the event organiser;
9. closure of the place mentioned on the insured entry Ticket due to administrative, regulatory or security reasons, decided by public authorities or by the organiser of the event itself;
10. failure by the Insured Person to comply with the safety rules imposed by the transportation company or any rule decreed by the local authorities;
11. failure by the Insured Person to comply with bans issued by the local authorities;
12. restriction of free movement of persons and goods, airport closures and border closures,

The following will also be excluded:

13. damage which occurred before this policy was taken out;
14. unless otherwise stated in the cover, the consequences of an Epidemic or Pandemic.
15. the consequences of:
 - exposure to infectious biological agents, chemical agents such as poison gas, incapacitating agents, radioactive agents, neurotoxic agents or agents with residual neurotoxic effects;situations involving quarantine or specific preventive or monitoring measures or recommendations by the international or local health authorities;
 - natural and/or human pollution.

TYPES OF COVER UNDER THE POLICY

CANCELLATION

SPECIFIC DEFINITIONS FOR THIS COVER

CANCELLATION: firm and final withdrawal by the Insured from all the insured services, notified to the Approved Organisation or Intermediary.

PROGRESSION CHECK-UP: a new medical appointment and/or additional medical examinations.

Definitions of terms common to all types of cover are shown in the chapter 'definitions common to all types of cover', at the beginning of this policy.

1. PURPOSE OF THE COVER

Within the limits of the amounts indicated in the cover table, the Insurer will reimburse the price of the insured entry ticket to the Park and associated bookings if it is impossible to attend following the occurrence of an insured Event.

Only entry tickets to the park and associated bookings with a set date for the performance can be insured.

2. EVENTS COVERED IN THE CASE OF CANCELLATION

The Cancellation must be the result, after the insurance has been taken out, of one of the following Insured Events, which absolutely prevents the Departure of the Insured Person:

► Medical events:

2.1. An Illness, including related to pregnancy or to an Epidemic/Pandemic or Accidental Bodily Injury

which must involve:

- either hospitalisation from the date of the Cancellation up to the originally scheduled Departure date,
- or,
 - the cessation of all professional activity, or home care if the person does not work, from the day of Cancellation to the originally scheduled Departure date,

and

- a medical consultation, including medical treatment from the day of the Cancellation, or undergoing tests prescribed by a Doctor,

with, in all cases, the payment for all this treatment by one of the health insurance organisations with which the Insured Person is affiliated;

affecting:

- the Insured Person, their spouse, de facto spouse or civil partner, or direct ascendants or descendants, as well as those of their spouse, de facto spouse or civil partner,
- the person under their supervision,
- their work replacement, named when this policy was taken out or, failing this, the person named by the company in the context of its organisation of paid leave,
- the person responsible, during the Insured Person's visit to or Holiday at the Puy du Fou Park, for looking after the minor children of the Insured Person or the disabled person living in the Insured Person's home.

► Family events:

2.2. The death (including death linked to an Epidemic/Pandemic) of:

- the Insured Person, their spouse, de facto spouse or civil partner, or direct ascendants or descendants, as well as those of their spouse, de facto spouse or civil partner,

- their brothers, sisters, brothers-in-law, sisters-in-law, sons-in-law, daughters-in-law, fathers-in-law, mothers-in-law, legal guardians, or wards,
 - their work replacement, named when this policy was taken out or, failing this, the person named by the company in the context of its organisation of paid leave,
 - the person responsible, during the Insured Person's visit to or Holiday at the Puy du Fou Park, for looking after the minor children of the Insured Person or the disabled person living in the Insured Person's home.
- 2.3. Notification to the Insured Person for the adoption of a child during their Holiday**, provided that they were not aware of such notification at the time the booking was made.

► **Professional or academic events:**

- 2.4. Notification to the Insured Person to re-sit an examination in the context of their studies**, on a date during the period of attendance of the Insured Person at the Puy du Fou Park on condition that the examination failure was not known at the time of booking.
- 2.5. The cancellation or change by the Insured Person's employer of the date of the paid leave granted before the insured Service was arranged.** The cover is provided to salaried employees, **except for those for who do not require approval from a superior in order to set the date of, change and/or cancel their leave** (e.g.: senior executives, managers and company legal representatives).
The compensation will be paid out after the specific Excess appearing in the Cover Table is deducted.
This Excess also applies to the persons booked on the insured Service at the same time as the Insured Person who has cancelled or changed the insured Service.
The cover does not apply if the Policyholder of this policy is the company that changes work leave.

► **Property Damage Events:**

- 2.6. Serious property Damage occurring in the forty-eight hours (48 h) prior to the visit to the Puy du Fou Park, resulting from:**
- burglary involving Break-in;
 - fire;
 - water damage;
 - any climatic, meteorological or natural event, excluding Natural Disasters;
- directly affecting the Insured Person's primary or secondary residence,
and requiring the presence of the Insured Person on site, on a date during the period of their visit to the Puy du Fou Park to carry out administrative procedures associated with the damage, or with the restoration of the damaged property.
- 2.7. Serious damage to the Insured Person's vehicle, occurring in the forty-eight (48) hours preceding their Departure**, provided that the vehicle can no longer be used to travel to the Puy du Fou Park on the booked day.

► **Other events:**

- 2.8. Notification to the Insured Person for an organ transplant during the period of the visit to the Puy du Fou Park.**
- 2.9. Theft of the entry ticket to the Park and associated bookings involving assault or break-in to the Home or vehicle.**
- 2.10. A public transport strike on the date mentioned on the insured entry Ticket, i.e. the total stoppage of the public transport with which the Insured Person had originally planned to travel to the place mentioned on the insured entry Ticket, following strike action, insofar as there is no other means of public transport which would allow him to travel there.**
- 2.11. The birth of a child of the Insured Person on the day of their entry to the Puy du Fou Park or in the previous forty-eight (48) hours.**
- 2.12. Quarantine of the Insured Person or of an insured travel companion**, provided that it starts before Departure and ends during the dates of the visit to the Puy du Fou Park.
- 2.13. The Cancellation of insured companions remaining alone or two (2) persons travelling to the Puy du Fou due to the insured Cancellation of one of the Insured Persons, on condition that they are all insured under this policy and are listed on the same sales agreement for the insured service.**
However, all of the insured persons who are part of the same household for tax purposes, or who can prove that they are directly related, are insured under the "Cancellation" cover.
- 2.14. The unforeseen and compulsory summons for the Insured Person to appear before court, as a witness or on jury service, that cannot be postponed.**

3. COVER AMOUNT

Within the limits of the amounts indicated in the Cover Table, the Insurer will reimburse the amount of the entry ticket for the Park and associated bookings.

Billed cancellation charges will be reimbursed up to the limits shown in the Cover Table, without, however, exceeding the limit per insured person and the Limit per Insured Event.

Compensation from the Insurer may not under any circumstances exceed the price of the entry ticket to the Park and associated bookings, declared when this policy was taken out.

The costs of mailing, application fees, and other expenses, separate from the price of the tickets as well as the premium paid in return for taking out this policy, are non-refundable.

4. COVER EXCLUSIONS

In addition to the 'General Exclusions' (except for article 12) shown at the beginning of this policy and any exclusions shown in the definitions, the consequences of the following circumstances and events are also excluded:

- 4.1. the consequences, after-effects, complications or aggravations of an Illness or Accidental Bodily Injury, which were diagnosed before the insured service was booked;
- 4.2. Illnesses or Accidental Bodily Injuries that were diagnosed, treated, recurred, worsened or required a hospital stay between the date of booking of the Insured Service and the date on which this policy was taken out;
- 4.3. Illnesses that were diagnosed, progressed or resulted in an additional examination or change in treatment within thirty (30) days before the booking of the Insured Service;
- 4.4. Accidental Bodily Injuries that occurred or resulted in surgery, rehabilitation, an additional examination or change in treatment within thirty (30) days before the booking of the Insured Service;
- 4.5. voluntary termination of pregnancy, in vitro fertilisation;
- 4.6. medical contraindications applying to the Insured Service that are not the result of an Illness, including related to pregnancy, or Accidental Bodily Injury, according to the terms of Article 2.1 of this cover;
- 4.7. Natural Disasters;
- 4.8. any Insured Event occurring between the date the Insured Service was booked and the date this policy was taken out.
- 4.9. all cancellation charges which may be payable by the approved Organisation or Intermediary in accordance with European Directive (EU) of 25 November 2015 on package travel and linked travel arrangements.

5. WHAT THE INSURED PERSON MUST DO IN THE EVENT OF CANCELLATION

The Insured Person must notify the approved Organisation or Intermediary of the Show of its Cancellation as soon as an Insured Event preventing the scheduled Departure occurs.

The Insured Person must then make a claim to the Insurer **within five (5) working days** of the day on which they became aware of the event, except in the case of an act of God or force majeure:



In order to expedite the claim and streamline processing on the case, we recommend submitting the claim on the following website: <https://indemnisation.allianz-travel.fr>

The Insured Person can track the progress of their case 24/7 by logging on to the website.

The Insured Person can also contact the Insurer by telephone from Monday to Friday between 9.00 a.m. and 6.00 p.m. (mainland France time zone):

From France (if the Insured Person's current location is in France)

- +33 (0)1 42 99 03 95 (standard rate call) for French speakers
- +33 (0)1 42 99 03 97 (standard rate call) for non-French-speaking Insured Persons

Outside France (if the Insured Person's current location is not in France)

- +33 (0)1 42 99 03 95 for French speakers
- +33 (0)1 42 99 03 97 for non-French-speaking Insured Persons

After this period, if the Insurer incurs a loss because of the Insured Person's late filing of a claim, compensation may be reduced according to the loss incurred.

6. SUPPORTING DOCUMENTS TO BE PROVIDED



IMPORTANT

It is the responsibility of the Insured Person to prove that all the conditions required for implementation of this "Cancellation" cover are satisfied by means of the supporting documents referred to below.

These documents and all information provided by the Insured Person shall serve as proof of the reason for the Cancellation and enable assessment of the amount of their compensation.

If the reason for the Cancellation is medical, the Insured Person may, if he so wishes, send the medical details in an envelope marked "Confidential" for the attention of the Insurer's medical advisor.

If no supporting documents are provided or if the supporting documents do not provide material proof of the Insured Event cited, the Insurer will be entitled to refuse the Insured Person's compensation claim.

INSURED EVENTS	SUPPORTING DOCUMENTS TO BE PROVIDED	
IN ALL CASES	<ul style="list-style-type: none"> • booking confirmation for the insured services; • the invoice for the cancellation fees for the insured services, • if applicable, official documentation specifying the family relationship with the person originating the Cancellation (copy of the official family record book, cohabitation certificate, etc.) • bank details, • any other supporting documents requested by the Insurer after the claim has been assessed. 	
In the event of illness, including related to pregnancy or to an Epidemic/Pandemic or Accidental Bodily Injury	<ul style="list-style-type: none"> • the medical questionnaire to be completed by the patient's Doctor, • prescriptions for medical treatment, if applicable; • examination reports, if applicable; • a copy of the sick leave certificate, if applicable; • if applicable, the hospitalisation form; • after the case has been considered, and at the request of the Insurer: the repayment statements from the health insurance organisation to which the Insured subscribes. 	
In the event of death (including linked to an Epidemic/Pandemic	<ul style="list-style-type: none"> • a copy of the death certificate; • contact information for the notary in charge of the deceased Insured Person's estate, if applicable. 	
In the event of a re-sit examination	<ul style="list-style-type: none"> • a copy of the notification of the examination re-sit, • a copy of the examination re-sit or grade report establishing that it was taken. 	
In the event of a requirement to be present notified by the employer	<ul style="list-style-type: none"> • a copy of the item confirming the requirement to attend. 	
In the event of serious property Damage	<ul style="list-style-type: none"> • the acknowledgement of receipt of the insurance claim with the insurer providing comprehensive home insurance; • in the event of burglary, a copy of the formal complaint filed with the police. 	
In the event of serious damage to a vehicle	<ul style="list-style-type: none"> • acknowledgement of receipt of the damage claim with the automobile insurance provider, • or a copy of the vehicle repair and/or towing bill. 	
In the event of being called for an organ transplant	<ul style="list-style-type: none"> • a copy of the notification. 	
In the event of theft of the insured entry ticket to the Park	<p>In all cases:</p> <ul style="list-style-type: none"> • the e-mail confirming Cancellation of the insured Access Ticket sent to the approved Organisation. 	<p>In the event of a house break-in:</p> <ul style="list-style-type: none"> • a copy of the detailed formal complaint, • the acknowledgement of receipt of the insurance claim from the insurer providing Multi-risk home insurance. <p>In the event of assault:</p> <ul style="list-style-type: none"> • a copy of the detailed formal complaint.

INSURED EVENTS	SUPPORTING DOCUMENTS TO BE PROVIDED
In the event of a strike of the public transport used by the Insured Person:	<ul style="list-style-type: none"> • a statement drawn up by the relevant transport company.
In the event of the birth of a child of the Insured Person	<ul style="list-style-type: none"> • a copy of the birth certificate.
In case of Quarantine	<ul style="list-style-type: none"> • the supporting document issued by the competent health authorities

HOLIDAY CURTAILMENT

DEFINITION SPECIFIC TO THIS COVER

HOLIDAY CURTAILMENT: early curtailment of the insured services following an Insured Event referred to in Article 1 below. Definitions of terms common to all types of cover are shown in the chapter 'definitions common to all types of cover', at the beginning of this policy.

1. PURPOSE OF THE COVER

The Insurer covers, up to the limits in the Cover Table, payment of an compensation in the event that the Insured Person's Holiday is curtailed as a result of the following Insured Events:

- medical repatriation of the Insured Person, organised by another assistance company,
 - the early return of the Insured Person, organised by another assistance company,
 - local hospitalisation (including in the event of an Illness linked to an Epidemic/a Pandemic) of the Insured Person, subject to Allianz Travel having given its consent beforehand,
- Quarantine of the Insured Person, or of an insured travel companion, occurring during their Holiday

2. COVER AMOUNT

The compensation is calculated from the day before the occurrence of one of the Insured Events referred to in Article 1. "Purpose of the cover" (medical repatriation, early return, local hospitalisation).



IMPORTANT

When the Holiday has been curtailed following hospitalisation of the Insured Person locally, the insured members of their family or the insured travel companion will be indemnified under the following conditions:

- if they have continued to occupy the Holiday rental accommodation, the compensation is calculated from the day after the day of their actual repatriation;
- if they have been required to vacate the Holiday location, they will be compensated under the same conditions as the Insured Person.

The compensation is proportional to the cost of unused accommodation services (number of nights) and is proportional to the number of Insured Persons who actually left the area of the Holiday during the period in question.

Calculation of the compensation is based on the number of nights originally scheduled, shown on the Holiday booking form.

The following will be deducted from the calculation basis: administrative fees, tips, the insurance premium, and any reimbursements or compensation granted by the approved Organisation or Intermediary of the insured service.

The compensation is paid up to the limits shown in the Cover Table per Insured Person, without, however, exceeding the Limit per Insured Event.

The basis for calculating the compensation varies based on the type of insured service:

• **For Holidays:**

The compensation is calculated based on the price of the insured service per Insured Person, up to the limits shown on the Cover Table, and after deduction of any reimbursements or compensations granted by the providers of the insured service.

3. COVER EXCLUSIONS

In addition to the 'General Exclusions' (except for article 12) shown at the beginning of this policy and any exclusions shown in the definitions, the consequences of the following circumstances and events are also excluded:

- 3.1. all events not stipulated in Article 1. "Purpose of the cover";
- 3.2. climatic, meteorological or natural events;
- 3.3. Natural Disasters.
- 3.4. failure by the Insured Person to comply with official travel bans issued by the authorities of their country of Residence or country of destination;
- 3.5. any trip to a country whose health authorities have ordered, by the day of Departure at the latest, Quarantine for any person arriving in their territory.

4. WHAT THE INSURED PERSON MUST DO IN THE EVENT OF AN INSURED LOSS

The Insured Person must report the Insured Loss to the Insurer within five (5) working days of the day of their knowledge of the event, except in the case of an act of God or force majeure, submitting their request for reimbursement of services not used:



In order to expedite the claim and streamline processing on the case, we recommend submitting the claim on the following website: <https://indemnisat.alianz-travel.fr>

The Insured Person can track the progress of their case 24/7 by logging on to the website.

The Insured Person can also contact the Insurer by telephone from Monday to Friday between 9.00 a.m. and 6.00 p.m. (mainland France time zone):

From France (if the Insured Person's current location is in France)

- +33 (0)1 42 99 03 95 (standard rate call) for French speakers
- +33 (0)1 42 99 03 97 (standard rate call) for non-French-speaking Insured Persons

Outside France (if the Insured Person's current location is not in France)

- +33 (0)1 42 99 03 95 for French speakers
- +33 (0)1 42 99 03 97 for non-French-speaking Insured Persons

5. SUPPORTING DOCUMENTS TO BE PROVIDED



IMPORTANT

It is for the Insured Person to prove that all the conditions required for implementation of this "Holiday Curtailment" cover are satisfied, by means of the supporting documents referred to below.

These documents and any information provided by the Insured Person will help to prove the damage sustained and to assess the amount of compensation due.

If no supporting documents are provided or if the supporting documents do not provide material proof of the damage sustained, the Insurer will be entitled to refuse the Insured Person's reimbursement claim.

INSURED EVENTS

IN ALL CASES

SUPPORTING DOCUMENTS TO BE PROVIDED

- the invoices of the approved Organisation or Intermediary of the insured service,
 - bank details,
 - the original used or unused return tickets,
 - the Allianz Travel file number set up for the Insured Person when obtaining agreement to curtail the holiday;
- or
- the intervention certificate from another assistance company specifying the reason for the intervention;
 - any other supporting documents requested by the Insurer after the claim has been assessed.

DELAYED RETURN

“INDIVIDUAL” COMPREHENSIVE OPTION AND

“GROUP” COMPREHENSIVE OPTION

1. PURPOSE OF THE COVER

The purpose of the cover is to pay out compensation to the Insured Person should it clearly be impossible to return on the originally scheduled dates and times for their Trip after an event expressly set out in Article 2 “Insured Events” for this cover.

2. INSURED EVENTS

The Insured Person will be eligible from all the types of cover appearing in Article 3 “Types of Cover”, should an Insured Event set out below occur, making it clearly impossible to return on the originally scheduled dates and times for their Holiday:

2.1. Illness linked to an Epidemic/a Pandemic necessarily entailing:

- either hospitalisation locally,
- or a medical consultation, including medical treatment or completion of medical examinations prescribed by a Doctor, with, in all cases, payment for these measures by one of the health insurance organisations to which the person concerned is affiliated, occurring to the Insured Person.

2.2. Quarantine of the Insured Person or of an insured travel companion during their visit to Puy du Fou Park.

3. TYPES OF COVER

3.1. Holiday Extension

The Insurer will reimburse the Accommodation Costs and food and drink expenses as a result of an Insured Event set out in Article 2 of this cover, incurred by the Insured Person in order to deal with the temporary extension of their Holiday, as well as the expenses of the insured members of their family or an insured travel companion.

The cover will only apply should there be a delay of **more than twelve (12) hours** from the original Departure time stated on the insured travel document or on the notification given by the transportation operator.

3.2. Redirection to the original return location

The Insurer will reimburse the travel expenses incurred by the Insured Person in order to get to the return location specified on the ticket booked for the Holiday.

4. COVER AMOUNT

The Insurer will reimburse the expenses stated in Article 3 above, up to the limits stated in the Cover Table.

5. COVER EXCLUSIONS

In addition to the General Exclusions (except for Article 12), and any exclusions appearing in the definitions and exclusions set out in the “Assistance to the Insured Person” cover, the following will also be excluded:

- 5.1. all expenses and services which are legally incumbent on the Authorised Organisation or Intermediary for the Trip or on the transportation operator;
- 5.2. the consequences of strikes announced beforehand
- 5.3. the Insured Person not being permitted on board by transportation operator, as a result of behaviour deemed aggressive and/or dangerous by the staff responsible for transporting passengers, or after failing to comply with the deadline for checking in baggage and/or appearing at the boarding area;
- 5.4. failure by the Insured Person to comply with official travel bans issued by the authorities of their country of Residence or country of destination.

6. WHAT THE INSURED PERSON MUST DO IN THE EVENT OF A CLAIM

The Insured Person must submit a claim to the Insurer **within five (5) working days** of becoming aware of it, except in the case of an act of God or force majeure.



To make the process for reporting the claim easier and to process the case more efficiently, we would recommend reporting the event on the following website: <https://indemnisat.ianz-travel.fr>

A confidential access code means that the Insured Person can track the progress of the case 24/7.

The Insured Person can also contact the Insurer by telephone from Monday to Friday between 9:00 am and 6:00 pm (mainland France time zone):

From France (if the Insured Person's current location is in France)

- +33 (0)1 42 99 03 95* for French speakers
- +33 (0)1 42 99 03 97* for non-French-speaking Insured Persons

Outside France (if the Insured Person's current location is not in France)

- +33 (0)1 42 99 03 95* for French speakers
- +33 (1) 42 99 03 97* for non-French-speaking Insured Persons

* standard rate numbers

After this period, if the Insurer incurs a loss because of the Insured Person's late submission, the compensation may be reduced based on the loss incurred.

7. SUPPORTING DOCUMENTS TO BE PROVIDED



IMPORTANT

It is up to the Insured Person to prove that all the conditions required for the implementing this "Delayed Return" cover are satisfied, based on the supporting documents set out below.

These documents and any information provided by the Insured Person will help to prove the damage sustained and to assess the amount of compensation due.

If no supporting documents are provided or if the supporting documents do not provide material proof of the damage sustained, the Insurer will be entitled to refuse the Insured Person's reimbursement claim.

DELAYED RETURN	SUPPORTING DOCUMENTS TO BE PROVIDED
<p>IN ALL CASES</p>	<ul style="list-style-type: none"> • the original unused tickets <p>In all cases:</p> <ul style="list-style-type: none"> • the original supporting documents for the expenses incurred (Accommodation Costs and food and drink expenses) • any other supporting documents requested by the Insurer after the claim has been assessed
<p>Trip Extension</p>	<p>In the case of an illness linked to an Epidemic/a Pandemic</p> <ul style="list-style-type: none"> • if applicable, the prescriptions for medical treatment • if applicable, examination reports • if applicable, the hospitalisation form • after the claim has been assessed and at the request of the Insurer: the reimbursement statements from the health insurance organisation with which the Insured is registered. <hr/> <p>In case of Quarantine</p> <ul style="list-style-type: none"> • the supporting document issued by the relevant local health authorities <hr/> <p>In all cases:</p> <ul style="list-style-type: none"> • the invoice for the newly purchased tickets

DELAYED RETURN**SUPPORTING DOCUMENTS TO BE PROVIDED****Redirection to the original return location****In the case of an Illness linked to an Epidemic/a Pandemic**

- if applicable, the prescriptions for medical treatment
- if applicable, examination reports
- if applicable, the hospitalisation form
- after the claim has been assessed and at the request of the Insurer: the reimbursement statements from the health insurance organisation with which the Insured is registered.

In case of Quarantine

- the supporting document issued by the relevant local health authorities

ADMINISTRATIVE PROVISIONS

1. LEGISLATION GOVERNING THE POLICY AND WHERE IT IS TAKEN OUT

This policy is governed by the French Insurance Code, the General Terms and Conditions, and the sales agreement for the insured service.

This policy is drawn up in French and subject to French law.

Since this involves transactions carried out on a website hosted in France, the virtual space made up of the web pages of the site www.puydufou.com is deemed to be located in the French area and policies taken out on it are therefore located in France, without prejudice to the protection given to the consumer by the law of the country in which the consumer normally lives.

2. PROCEDURES FOR TAKING OUT THIS POLICY, ENTRY INTO EFFECT AND TERMINATION OF COVER

a. Procedures for taking out this policy and its entry into effect

The policy must be taken out on the same day as the purchase of the entry ticket to the Park and any associated bookings. It may also be taken out no later than seventy-two (72) hours following the day of purchase of the entry ticket to the Park and any associated bookings, provided that the date of entry to the Park and associated bookings is more than seven (7) business days from the date this policy was taken out.

This policy enters into force at the time it is taken out.

b. Entry into effect and termination of cover

The cover will commence:

- for “**Cancellation**” cover: at 12:00 am on the day after payment by the Insured Person of the premium.

It ends at the start of the insured service.

- for the “**Holiday Curtailment**” cover: at 12:00 am on the date of Departure indicated in the sales agreement for the insured service, and after payment of the premium by the Insured Person at the earliest.

It ends twenty-four (24) hours after the return time indicated on the sales agreement for the insured service.

- for the “**Delayed Return**” (**Trip Extension and Redirection to the Original Return Location**) cover: from the time that the Insured Person leaves the Departure location for the Holiday (a maximum of 24 hours before the Departure date stated in the sales contract and after the premium is paid by the Insured Person, at the earliest.

The cover will cease twenty-four (24) hours after the time that the Insured Person actually returns.

3. CANCELLATION OPTION

The Insured Person may exercise a cancellation option after taking out an insurance policy.

a. Cancellation option

• Multi-insurance

Under the provisions of Article L112-10 of the French Insurance Code, an Insured Person who takes out an insurance policy for non-professional purposes constituting a **supplement to goods or services sold by an intermediary** may cancel this policy, at no cost or penalty, if they provide proof of prior cover for one of the risks covered by this policy, provided that it has not been fully implemented and the Insured Person has not made a claim. This cancellation must occur within fourteen (14) calendar days from this policy being entered into.

• Remote sales

Under Article L112-2-1 of the French Insurance Code, a cancellation right applies to insurance policies taken out remotely, in particular those sold on-line, without the simultaneous physical presence of the parties to the policy, door-to-door or outside the seller's usual place of business.

This cancellation right does not apply to travel or baggage insurance policies or to similar short-term insurance policies with a duration of less than one (1) month. The duration of the insurance policy corresponds to the period between the date on which it was taken out and the date of cessation of all cover.

b. Procedures for exercising the cancellation option

When the insurance policy is eligible for the cancellation option under the conditions defined above, the Insured Person may exercise this option by returning a cancellation request, duly dated and signed, to “Grand Parc du Puy du Fou” within fourteen (14) calendar days of the date of conclusion of this policy:

- either **by e-mail** to the following e-mail address: contact@puydufou.com
- or by **registered letter with acknowledgement of receipt** to the following address:

The Insured Person may, if they wish, use the template cancellation letter below:

'I, the undersigned, surname, first name, date and place of birth, would like to cancel the cover under insurance policy no. ... which I took out with AWP P&C on... (date).

Signed in... (Place). On... (Date) and Signature: ...".

When cancelling on the grounds of multi-insurance, the Insured Person must enclose along with their request supporting documents substantiating the existence of a current insurance policy covering risks similar to this policy.

If the Insured Person exercises this option, the policy will be terminated on the commencement date. The Insured Person will be reimbursed the corresponding premium within thirty (30) days of the date on which their cancellation application is received.

The right to cancel may not be exercised if the Insured Person has implemented the cover in this insurance policy in the context of a claim filed within fourteen (14) calendar days, and by consequence no premium will be refunded in this case.

4. CUMULATIVE INSURANCE

If the Insured Person is covered for the same risks with other insurance companies, they must inform the Insurer and provide them with their contact information and the scope of their cover, in accordance with Article L121-4 of the French Insurance Code. The Insured Person may receive compensation for their damage by contacting the Insurer of their choice.

5. SUBROGATION IN THE RIGHTS AND ACTIONS OF THE INSURED PERSON

In return for the payment of compensation, up to its limit amount, the Insurer becomes a beneficiary of the rights and actions that the Insured Person had against anyone liable for the claim, in accordance with Article L121-12 of the French Insurance Code.

If, due to the actions of the Insured Person, the Insurer can no longer perform this action, it may be discharged of all or part of its obligations to the Insured Person.

6. PENALTIES APPLICABLE IN THE EVENT OF MISREPRESENTATION WHEN TAKING OUT THE POLICY

- Any non-disclosure or intentional misrepresentation by the Insured Person in the statement of risk is punishable by the policy being rendered null and void under the conditions set out in Article L113-8 of the French Insurance Code.
- Any omission or inaccurate statement by the Insured Person when their bad faith has not been proven will be punished under the conditions set out in Article L113-9 of the French Insurance Code:
 - if it is ascertained before any Claim: the Insurer will be entitled either to uphold this Policy with an increase in the premium, or to terminate the Policy within ten (10) days by registered letter, by reimbursing the overpayment of the premium.
 - if it is only ascertained after the Claim: the Insurer may reduce the compensation in proportion to the amount of premium paid compared with the amount of premium that would have been due if the risk had been declared completely and precisely.

7. PENALTIES APPLICABLE IN THE EVENT OF INTENTIONAL MISREPRESENTATION BY THE INSURED PERSON ON THE DAY OF THE CLAIM

Any fraud, non-disclosure or intentional misrepresentation by the Insured Person about the circumstances or consequences of a claim will result in any entitlement to benefits or compensation for this Claim being lost.

8. PERIOD OF LIMITATION

Provisions relating to the period of limitation for legal actions arising from this insurance policy are set out in Articles L114-1 to L114-3 of the French Insurance Code, reproduced below:

- **Article L114-1 of the French Insurance Code**

"Any legal action arising from the insurance policy is covered by a period of limitation of two years from the event which gives rise to it.

However, this period runs:

1 In the event of non-disclosure, omission or misrepresentation regarding the risk, only from the day on which the insurer became aware of this;

2 In the event of a claim, only from the day on which the parties concerned became aware of this, if they prove that they were unaware up until then.

When the legal action by the Insured Person against the Insurer is due to redress by a third party, the period of limitation runs only from the day on which that third party filed legal proceedings against the Insured Person or was compensated by the Insured Person.

The statute of limitations is increased to ten years in life insurance policies when the beneficiary is a person other than the policyholder and, in personal accident insurance policies, when the beneficiaries are the legal successors of the deceased Insured Person.

For life insurance policies, notwithstanding the provisions in section 2, legal action by the beneficiary is covered by a period of limitation of thirty years at the most as from the death of the insured person."

• **Article L114-2 of the French Insurance Code**

'The period of limitation is interrupted by one of the ordinary grounds for interrupting the period of limitation and by the appointment of an expert following a claim. The interruption of the statute of limitations may, furthermore, result from the sending of a registered letter with acknowledgement of receipt by the Insurer to the Insured Person relating to legal action for payment of the premium and by the Insured person to the Insurer relating to payment of compensation'.

• **Article L114-3 of the French Insurance Code**

'By way of derogation from Article 2254 of the French Civil Code, the parties to the insurance policy may not, even by mutual agreement, either change the duration of the statute of limitations, or add to the grounds for the suspension or interruption thereof'.

ADDITIONAL INFORMATION:

The ordinary grounds of interruption of the period of limitation are set out in Articles 2240 et seq. of the French Civil Code, among which are in particular: recognition by the debtor of the right of the person against whom he was prescribing, legal proceedings, even in summary proceedings, and the act of forced enforcement.

For a full list of ordinary grounds for interrupting the period of limitation, please refer to the aforementioned articles of the French Civil Code.

9. ADDRESS FOR SENDING SUPPORTING DOCUMENTS TO BE PROVIDED IN THE EVENT OF A CLAIM

Supporting documents for each of the following types of cover should be sent to the address below:

"Cancellation" Cover and "Holiday Curtailment", "delayed return" cover
AWP France SAS Service Indemnisation Assurances DOP01 7 rue Dora Maar CS 60001 93488 Saint-Ouen Cedex

10. LOSS ASSESSMENT

The causes and consequences of the claim are assessed by mutual agreement or, failing this, by a joint third-party expert evaluation, subject to the respective rights of the Insurer and the Insured Person. The fees for this expert assessment will be shared between the parties.

If the parties are unable to agree on selecting the third-party expert, the Presiding Judge of the Tribunal de Grande Instance [Regional Court] of the Policyholder's Place of Residence will appoint one.

This appointment will be made in a written request signed by the Insurer or by only one of the parties, with the other having been summoned by registered letter.

11. TIME PERIOD FOR SETTLING CLAIMS

a. Calculating the compensation

When the invoices provided are not denominated in euros, the compensation amount will be based on the exchange rate applying on the date on which the compensation is calculated.

b. Time period

Once the Insured Person's case has concluded, their compensation will be paid within ten (10) days of the agreement between the Insurer and the Insured Person, or the enforceable court decision.

12. COMPLAINTS HANDLING PROCEDURES

When an Insured Person is dissatisfied with the way their claim has been handled, their first course of action should be to inform their usual contact so that the reason for this dissatisfaction can be understood and solutions can be sought.

In the event of a disagreement on the solutions suggested, the Insured Person may send a complaint to the following e-mail address:

reclamation@votreassistance.fr

(or send a letter to the following address: AWP FRANCE SAS, Service Réclamations, TSA 70002 – 93488 Saint Ouen Cedex.)

The Insured Person will receive an acknowledgement of receipt within ten (10) working days (excluding Sundays and public holidays) from the date on which the complaint is received, unless a response to the complaint is sent within this period.

A response will be provided no later than two (2) months after the date on which the complaint is received, unless special circumstances arise; in that event, the Insurer will keep the Insured Person informed.

If the dispute has not been resolved after the Insurer has responded, after a final assessment of the application has been made and all means of internal appeal have been exhausted, after having made their claim to AWP & C and if the dispute persists, the Insured Person may then refer the matter to the independent ombudsman, at the following address:

La Médiation de l'Assurance

<http://www.mediation-assurance.org>

LMA

TSA 50110

75441 Paris Cedex 09

The Insured Person's request to the Insurance Mediation must, if necessary, be made at the latest within one (1) year of their written complaint to AWP P&C.

Insurance companies belonging to the FFA have established a system to enable Insured Persons and third parties to access a mediation procedure for settling their disputes. This system is governed by the 10 rules set out in the Insurance Mediation Charter.

Complaints relating to policies taken out by individuals over the internet may be submitted to the European Online Dispute Resolution platform, accessible at the following address: <https://webgate.ec.europa.eu/odr>

13. LEGAL JURISDICTION

AWP P&C registers as its address for service: **7 rue Dora Maar - 93400 Saint-Ouen**.

Any disputes raised against AWP P&C concerning this policy shall be exclusively submitted to the competent French courts and all notices should be sent by registered post requiring acknowledgement of receipt, to one of the addresses shown above, depending on the date of the dispute.

14. PERSONAL DATA PROTECTION

The processing of personal data is governed by the French Law on Data Protection and Civil Liberties of 6 January 1978 and Regulation (EU) 2016/679 of 27 April 2016 on the protection of natural persons with regard to the processing of personal data and on the free movement of such data.

AWP P&C is the data controller for the personal data collected with a view to taking out, managing and performing policies.

This data will be stored for the period required for executing the policy and in accordance with the provisions relating to the period of limitation. Its use will be restricted to assistance service and/or insurance cover managers and it may be disclosed to data processors, located inside or outside the European Union.

Under the legislation and regulations applicable in data protection matters, the Insured Person may exercise their right to access data concerning them or have it corrected by contacting: informations-personnelles@votreassistance.fr.

For more information, please see the Privacy Statement explaining, among other things, how and why personal data are collected. The most recent version was given to the Insured Person when this policy was taken out.

As part of its risk management policy and anti-fraud activities, AWP France SAS reserves the right to monitor all information and, if necessary, to inform the competent authorities in accordance with the legislation in force.

15. REGULATORY AUTHORITY

The body responsible for the regulation of AWP P&C is the Autorité de Contrôle Prudentiel et de Résolution [French insurance industry regulatory authority], 4 Place de Budapest, CS92459, 75436 Paris Cedex 09- www.acpr.banque-france.fr

16. LEGAL INFORMATION

The insurance cover is provided by: AWP P&C

A société anonyme [corporation] with a share capital of €17,287,285.00 registered with the Bobigny Register of Companies under No. 519 490 080, and with its registered office at: 7 rue Dora Maar – 93400 Saint-Ouen

A private company governed by the French Insurance Code.

The assistance services are implemented by: AWP FRANCE SAS

Société par actions simplifiée [simplified joint-stock company] with capital of €7,584,076.86, registered with the Bobigny Register of Companies under No. 490 381 753, and with its registered office at: 7 rue Dora Maar – 93400 Saint-Ouen, insurance brokerage company – ORIAS No. 07 026 669 – <http://www.orias.fr/>

Referred to above by its commercial name "Allianz Travel".

PRIVACY STATEMENT

We take the security of your personal data very seriously

AWP P&C, an entity of Allianz Partners SAS, is an insurance company approved by the **Autorité de contrôle prudentiel et de résolution [French insurance industry regulatory authority, ACPR]**, offering insurance products and services. Protecting your privacy is our number one priority. This Privacy Statement will explain how we collect personal data, what type of data we collect and why, with whom we share them and to whom we disclose them. Please read this statement carefully.

1. WHO IS THE DATA CONTROLLER?

The data controller is the person, natural or legal, who controls and is responsible for the storage and use of personal data, in paper or electronic format. **AWP P&C** ("We", "Our") is the data controller, as defined by the applicable data protection laws and regulations.

2. WHICH PERSONAL DATA ARE COLLECTED?

We will collect and process various types of personal data about you, as follows:

- identification data for persons who are party to, affected by or involved in the policy and
- any other data required for drawing up and/or executing the policy.

In doing so, we may be required to collect and process "sensitive personal data" about you.



IMPORTANT

By taking out this policy, you undertake to disclose the information referred to in this privacy statement to any third party for whose personal data may be transmitted to us (e.g. other Insured Persons, beneficiaries, third parties involved in the insured loss, persons to be notified in an emergency, etc.) and you agree not to disclose this information otherwise.

3. HOW ARE MY PERSONAL DATA COLLECTED AND PROCESSED?

We will collect and process the personal data that you send to us and personal data that we receive from third parties (as explained below) for a number of purposes and provided that you explicitly consent to this, unless this is not required by applicable laws and regulations, as stated below:

PURPOSE	IS MY EXPLICIT CONSENT NECESSARY?
<ul style="list-style-type: none">• Getting a quotation and taking out the insurance policy	<ul style="list-style-type: none">• No, as these processing activities are required for implementing the insurance policy to which you are party and for taking the required measures prior to entering into this policy.
<ul style="list-style-type: none">• Administration for the insurance policy (such as handling complaints, investigations and estimates required for establishing that the Insured Event occurred and the amount of compensation to be paid or the type of assistance to be provided)	<ul style="list-style-type: none">• Yes, if necessary. However, in circumstances where we need to process your personal data for handling your complaint, we will not request your explicit consent.
<ul style="list-style-type: none">• In order to conduct quality checks on the services provided, in order to check, and ideally improve, your level of satisfaction	<ul style="list-style-type: none">• No. We have a legitimate interest in contacting you after handling a request or providing a service so that we can make sure that we have fulfilled our contractual obligations to your satisfaction. However, you will be entitled to object to this by contacting us as set out in section 9 below.
<ul style="list-style-type: none">• In order to meet all statutory obligations (such as obligations deriving from laws relating to insurance policies and insurance activities, regulations on tax, accounting and administrative obligations)	<ul style="list-style-type: none">• No, as these processing activities are specifically and legally authorised.

PURPOSE	IS MY EXPLICIT CONSENT NECESSARY?
<ul style="list-style-type: none"> For monitoring purposes, in order to adhere to statutory obligations or internal procedures 	<ul style="list-style-type: none"> No. We may process your data as part of internal or external audits, which may be required either by law or our own internal procedures. We will not request your consent for these processing activities if they are justified under the regulations in force or for the purposes of our legitimate interest. However, we will ensure that only personal data that are strictly required will be used and that they will be processed in complete confidentiality. Internal audits will generally be carried out by our parent company, Allianz Partners SAS (7 Rue Dora Maar, 93400 Saint-Ouen, France).
<ul style="list-style-type: none"> In order to produce statistical and qualitative analyses based on compensation-claim data and frequency 	<ul style="list-style-type: none"> If we carry out one of these processing activities, the personal data used will be rendered anonymous. Therefore, any such 'anonymous' data will no longer be considered as 'personal' data and your consent will no longer be required.
<ul style="list-style-type: none"> For debt recovery management (such as in order to demand payment of the premium, debts from third parties or distribute the compensation amount among the various insurance companies covering the same risk) 	<ul style="list-style-type: none"> No, if processing your data (even if this involves sensitive categories of personal data) is required for establishing, exercising or protecting rights in legal proceedings, which we may also invoke in respect of our legitimate interest.
<ul style="list-style-type: none"> In order to prevent and combat fraud and money laundering, and comply with regulations applying to economic sanctions, including, where applicable and as an example, comparing your information with information featuring in previous claims, or verifying the current claim submission procedures. 	<ul style="list-style-type: none"> No. Detecting and preventing fraud and money laundering and complying with the regulations applying to economic sanctions will be a legitimate interest for the Data Controller. Therefore, we are entitled to process your data for this purpose without having first obtained your consent.
<ul style="list-style-type: none"> In order to transfer risks via reinsurance and co-insurance 	<ul style="list-style-type: none"> We may process and share your personal data with other insurance or reinsurance company, with whom we have signed or will sign co-insurance or reinsurance agreements. Co-insurance is the coverage of the risk by more than one insurance company using a single policy, with each company then assuming a percentage of the risk or sharing the types of cover between them. Reinsurance is the process of 'subcontracting' the cover for a part of the risk to a third party re-insurer. However, this is an internal agreement between us and the re-insurer, and you have no direct contractual link with the re-insurer. These transfers of risks occur in respect of the legitimate interests of insurance companies, which are generally specifically authorised by law (including the sharing of personal data strictly necessary for this purpose)

As mentioned above, for the purposes listed above, we will process the personal data about you that we receive from our commercial partner GRAND PARC DU PUY DU FOU.

For the purposes mentioned above for which we have indicated that your express consent is not required or in cases where we need your personal data for the purpose of taking out your insurance and/or managing your claim, we will process your personal data on the basis of our legitimate interests and/or in accordance with our legal obligations.

Your personal data will be required for any purchase of our products and services. If you do not want to provide us with these data, we will not be able to guarantee you access to the products and services which you have requested or which are likely to interest you, or to suggest services to you which are tailored to your specific requirements.

4. WHO IS ABLE TO ACCESS MY PERSONAL DATA?

We will ensure that your personal data will be processed in compliance with the purposes set out above.

For the stated purposes, your personal data may be disclosed to the following parties, operating as third-party data controllers:

- public sector bodies, other Allianz group companies, other insurers and reinsurers.

For the stated purposes, your personal data may be disclosed to the following parties, operating as data processors under our responsibility:

- other Allianz group companies (including AWP France SAS), technical consultants, experts, lawyers, claims adjusters, repairers, service providers, doctors and service companies to which we outsource our operations (claims, IT, postal services and document management)

Finally, we may be required to share your personal data in the following cases:

- in planned or actual cases of restructuring, mergers, sales, joint ventures, assignments, transfers or other arrangement relating to all or part of our business, assets or securities (including in connection with insolvency or other similar proceedings); and
- in order to comply with any legal obligations, including obligations arising from the ombudsman's decisions should you submit a complaint about any of our products or services.

5. WHERE ARE MY PERSONAL DATA PROCESSED?

Your personal data may be processed both within and outside of the European Union (EU) by the parties specified in section 4, which are always subject to contractual restrictions relating to privacy and security, in accordance with applicable data protection laws and regulations. We will not disclose your personal data to parties which are not authorised to process them.

Any transfer of your personal data for processing outside of the EU by another Allianz Group company will be performed following the internal company rules approved by the Regulatory Authority to which the Allianz Group belongs, establishing suitable rules for protecting personal data and legally binding on all companies in the Allianz Group. Allianz's internal corporate rules and the list of group companies that comply with them are available here: <https://www.allianz-partners.com/allianz-partners---binding-corporate-rules-.html>. Where Allianz's internal rules do not apply, we will take measures to ensure that the transfer of your personal data outside of the EU will be performed with a suitable level of protection, just as if it were a transfer within the EU. You can find out about the safeguards that we implement for this type of transfer (for example, standard contractual clauses) by contacting us as set out in section 9.

6. WHAT ARE MY RIGHTS IN RELATION TO MY PERSONAL DATA?

Where permitted by applicable law or regulations, you will be entitled to:

- access your personal data and discover their origin, the objectives and purposes for processing these data, information about the data controller(s), the data processor(s) and the recipients of any data that may be disclosed;
- withdraw your consent at any time, in situations where it is required for processing your personal data;
- update or correct your personal data so that they are always accurate;
- delete your personal data from our systems if storing them is no longer required for the purposes set out above;
- restrict processing of your personal data in certain circumstances, for example, if you have contested the accuracy of your personal data, for the period required by our departments in order to verify the accuracy of your personal data;
- obtain your personal data in an electronic format, for your personal use or for use by your new insurer; and
- file a complaint with our company and/or the competent data protection authority - Commission Nationale de l'Informatique et des Libertés (CNIL, French data protection authority).

You may exercise these rights by contacting us as set out in section 9.

7. HOW CAN I OBJECT TO MY PERSONAL DATA BEING PROCESSED?

Where permitted by applicable law or regulations, you will be entitled to object to your personal data being processed by our department, or to request our company to stop processing these data (including for direct marketing purposes). Once your request has been sent, we will no longer process your personal data unless permitted by applicable laws or regulations.

You may exercise this right in the same way as your other rights set out in section 6.

8. HOW LONG WILL YOU BE STORING MY PERSONAL DATA?

We will only store your personal data for as long as necessary for the purposes set out in this privacy statement and then they will be deleted or anonymised when no longer required. Please find below some of the retention periods which will apply to the purposes set out in section 3 above.

- For a period of two (2) years from the end date for the insurance policy
- In the event of a claim – two (2) years from the claim being settled.
- Should there be a claim involving bodily injury – ten (10) years from the claim.
- For any information on claims – two (2) years from the date on which the claim is received.
- For any information about the policy – two (2) years from expiry, termination or cancellation.

However, please be aware that additional specific obligations or events may sometimes cancel or alter these periods, such as ongoing regulatory disputes or investigations, which may replace or suspend these periods until the case is closed and the applicable review or appeal period has expired. In particular, storage periods based on periods of limitation for legal claims can be suspended and subsequently resume.

9. HOW CAN YOU CONTACT US?

If you have any questions about how we use your personal data, you can contact us by e-mail or post:

AWP France SAS

Département Protection des Données Personnelles

7 rue Dora Maar - 93400 Saint-Ouen

E-mail: informations-personnelles@votreassistance.fr

10. HOW OFTEN DO YOU UPDATE THIS PRIVACY STATEMENT?

We regularly review this privacy statement.

AWP France SAS - 7, rue Dora Maar - 93400 Saint-Ouen Cedex - Société par Actions Simplifiée au capital de 7 584 076,86 € - 490 381 753 RCS Bobigny - Siret 490 381 753 00055 - Société de courtage d'assurances immatriculée à l'ORIAS (www.orias.fr) sous le n° 07 026 669 - Autorité de Contrôle Prudentiel et de Résolution sise 4 Place de Budapest, CS92459, 75436 Paris Cedex 09 - www.acpr.banque-france.fr

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