

UPGRADE PERSONAL ACCIDENT COVER RIDER

ACCIDENTAL DEATH OR PERMANENT DISABLEMENT EXTENSION

1) It is hereby noted and agreed that with effect from inception, of the compensation table of Personal Accident in Section 1 is deemed to be deleted and replaced by the following:-

2) The Accident Bodily Injury sustained causes the Insured to suffer loss of life, Permanent Total Disablement or other loss during the Covered Trip, then the Company will pay the compensation in the form of a percentage of the Amount of Benefit stated in the Schedule as below:

| Even | nts | Percentage of Principal Sum |
|------|---|-----------------------------|
| 1. | Loss of Life | 100% |
| 2. | Permanent Total Disablement | 100% |
| 3. | Permanent and Incurable Paralysis of all Limbs | 100% |
| 4. | Permanent Total Loss of Sight of both Eyes | 100% |
| 5. | Permanent Total Loss of Sight of one Eye | 100% |
| 6. | Loss of or the Permanent Total Loss of use of two Limbs | 100% |
| 7. | Loss of or the Permanent Total Loss of use of one limb | |
| | Right Hand | 100% |
| | Left Hand | 100% |
| | One Foot | 100% |
| 8. | Loss of Speech and Hearing | 100% |
| 9. | Permanent and Incurable Insanity | 100% |
| 10. | Permanent Total Loss of Hearing in | |
| | both Ears | 75% |
| | one Ear | 15% |
| 11. | Loss of Speech | 50% |
| 12. | Permanent Total Loss of the Lens of one Eye | 50% |
| 13. | Loss of or the Permanent Total Loss of use of four Fingers and Thumb of | |
| | Right Hand | 70% |
| | Left Hand | 50% |
| 14. | Loss of or the Permanent Total Loss of use of four Fingers of | |
| | Right Hand | 40% |
| | Left Hand | 30% |
| 15. | Loss of or the Permanent Total Loss of use of one Thumb | |
| | both Right Joints | 30% |
| | one Right Joint | 15% |
| | both Left Joints | 20% |
| | one Left Joint | 10% |
| 16. | Loss of or the Permanent Total Loss of use of Fingers | |
| | three Right Joints | 15% |
| | two Right Joints | 10% |
| | one Right Joint | 7.5% |
| | three Left Joints | 10% |
| | two Left Joints | 7.5% |
| | one Left Joint | 5% |
| 17. | Loss of or the Permanent Total Loss of use of Toes | |
| | all – one Foot | 20% |
| | great – both Joints | 7.5% |
| | great– Joint | 5% |
| 18. | Fractured Leg or Patella with established non-union | 15% |
| 19. | Shortening of Leg by at least 5cm | 10% |
| 20. | Permanent Disablement not otherwise provided for under Events 10 to 19 inclus | |
| | Sum Insured as the Company shall in its absolute discretion determine and being | |
| | and a series of the series of | |

Compensation provided under Events 10 to 19 inclusive.

a) If more than 1 event incurred in one accident which happened in the Covered Trip, the Company shall pay compensation under Personal Accident

Section for only one event of loss with the greatest amount.

COMA BENEFIT

This Travel Certificate is extended to provide Coma Benefit up to the extent herein limited and provided:

If during the Covered Trip, the Insured sustains Bodily Injury which directly causes or results in a continuous unconscious state and under the regular care and attendance of a Physician, the Company shall pay HK\$500 for each full week of continuous unconsciousness subject to fourteen (14) days waiting period and up to a maximum of fifty (50) weeks for any one Accident.

TRAUMA COUNSELING BENEFIT

This Travel Certificate is extended to provide Trauma Counseling Benefit up to the extent herein limited and provided:

If during the Covered Trip, the Insured witnesses and/or is the victim of a traumatic event such as rape, armed hold up, assault, natural disaster or acts of terrorism and the Insured is diagnosed as suffering from a post-traumatic stress disorder by a Physician and requires counseling service from a registered psychiatrist. The Company will pay the cost of trauma counseling incurred in Macau within ninety (90) days after return to Macau. The limit shall not exceed HK\$1,500 per day per visit and HK15,000 in total.

SUBJECT OTHERWISE TO THE TERMS, CONDITIONS AND EXCLUSIONS OF THE TRAVEL CERTIFICATE.

FIDELIDADE

忠誠保險

星級個人意外附加保障

個人意外死或永久傷殘延伸保障

1) 此延伸保障同意由保險證明書生效日起取消第 1 節個人意外賠償表並由以下賠償表代替:

| 2) | 如受保人在受保旅程期間因意外身體損傷而導致死亡、永久完全傷殘或 | |
|----|---------------------------------|--|
| , | 書事項 | 賠償 (保額百分率) |
| 1. | | 100% |
| 2. | | 100% |
| 3. | | 100% |
| 4. | | 100% |
| 5. | | 100% |
| 6. | | 100% |
| 7. | | 10070 |
| | 右手 | 100% |
| | 左手 | 100% |
| | 一足 | 100% |
| 8. | , - | 100% |
| 9. | | 100% |
| 10 | | 10070 |
| | 雙耳 | 75% |
| | 型耳 | 15% |
| 11 | | 50% |
| 12 | | 50% |
| 13 | | 0070 |
| | 右手 | 70% |
| | 左手 | 50% |
| 14 | — · | 3070 |
| | 右手 | 40% |
| | 7 左手 | 30% |
| 15 | - · | 3070 |
| | 兩個右關節 | |
| | 一個右關節 | 30% |
| | 兩個左關節 | 15% 20% |
| | 一個左關節 | 10% |
| 16 | 1000 | 10/0 |
| | 三個右關節 | |
| | 兩個個右關節 | 15% |
| | 一個右關節 | 10% |
| | 三個左關節 | 7.5% 10% |
| | 兩個左關節 | 7.5% |
| | 一個左關節 | 5% |
| 17 | | 070 |
| | 所有腳趾 — 一隻腳 | 000/ |
| | 腳拇趾 — 兩個關節 | 20% 7.5% |
| | 腳拇趾 —— 一個關節 | 5% |
| 18 | | 15% |
| 19 | | 10% |
| 20 | | |
| 0 | 會與以上第 10 至 19 項之百分率不一致。 | TO A TOWN OF THE PARTY OF THE P |

如在同一意外中涉及 1 個或以上損害事項,本公司將賠償最高賠償額的一項。

昏迷保障

此保險證明書延伸提供昏迷保障:

若受保人在受保旅程期間不幸因意外身故導致昏迷,受保人可獲每週賠償港幣 500 元。首兩星期不作賠償,最高為五十週。

創傷輔導

此保險證明書延伸提供創傷輔導:

若受保人在受保旅程期間目睹或遭遇慘重事故包括持械行劫、騎劫、天然災害或恐怖活動,回澳後經醫生診斷需接受精神科註冊醫生的輔導治療,本公司將賠償回澳後九十(90)日內每日每次最高港幣 1,500 元之賠償,最高賠償額為港幣 15,000 元。

其他保障內容、細則及不保事項請參閱保險證明書

(此中文譯本乃供參考之用,如中文譯本與英文有異,一概以英文為準)