INFORMATIVE NOTE PRIOR TO HIRING

Control and supervision body of the activity of the insurance company:

General Directorate of Insurance and Pension Funds of the Ministry of Economy and Business

INSURANCE ENTITY DATA

Company name and legal form

IRIS GLOBAL Soluciones de Protección Seguros y Reaseguros S.A.U. Inscrita en el Registro Mercantil de Madrid, Inscripción 9ª, Hoja M-68.782, Folio 60, Tomo 4141, Libro 0, Sección 8ª.

Registered Office

C/Julián Camarillo 36, 28037 MADRID (España)

Entity code

C-627.

PRODUCT NAME

Study Travel Assistance Insurance

3

TYPE OF INSURANCE

It is a travel assistance insurance for individuals, who travel through Spain or abroad, covering medical assistance and travel incidents that may occur during the trip.

Insurance contract modalities:

Temporary: The coverage period extends for a maximum period of 12 months of stay.

4

BASIC INFORMATION PRIOR TO THE

CONTRACTING OF THE INSURANCE

Basic information required:

The previous basic information of the Insurance Contractor, the Insured or the Beneficiary for insurance subscription is as follows:

- Identification data of the Insurance Contractor and insured: name, surnames, address, postal code, town, province, ID, NIE or Passport, if applicable, date of birth, email.
- Emergency contact, for adverse events.
- Contracted coverage and sums insured.
- Insurance start date and duration.
- Activity subject to insurance.
- Form of insurance.

BASIC
INFORMATION
PRIOR TO THE
CONTRACTING
OF THE
INSURANCE

Sum insured and coverage limits:

The maximum limits of the coverage of this Insurance shall be those stated in the Particular Conditions. For those guarantees in which there is no quantitative limit and that are indicated as included in the mentioned Particular Conditions, it shall be understood that the maximum limit of these shall be the effective cost of the provision of the service to be performed by the Insurance provider. In any case, all limits of this contract are per covered event.

Limit per covered event: the maximum compensation limit for which the Insurance provider is liable per event under coverage, for all individuals insured within the set of Insurance, even when various coverage are affected as a result of a single event, regardless of the number of Insured Persons affected.

The limit shall be the one established in the Particular Conditions.

Maximum compensation:

a) INDIVIDUAL INSURANCE: In the case of "PUBLIC HEALTH EMERGENCY OF INTERNATIONAL RELEVANCE", the maximum amount to be paid shall be € 3,000,000 for the total coverage that may correspond. In the case of ACCIDENT, unless otherwise stated in the Particular Conditions, the maximum amount to be paid shall be € 600,000 for the total coverage that may correspond.

b) GROUP INSURANCE: In the case of "PUBLIC HEALTH EMERGENCY OF INTERNATIONAL RELEVANCE", the maximum amount to be paid shall be € 3,000,000 for the total coverage that may correspond, regardless of the number of Insured members affected. For these purposes, all cases that occur during the 30 days after the declaration of quarantine, shall be considered the same event with coverage. In the case of ACCIDENT, unless otherwise indicated in the Particular Conditions, the maximum amount to be paid shall be € 600,000 for the total coverage that may correspond, regardless of the number of affected Insured persons.

A limit for Private Civil Liability coverage of € 600,000 (Six hundred thousand Euros) per insurance contract and year is established.

The currency applicable to this Insurance is the Euro and the limits of the coverage shall be expressed in this currency, regardless of the fact that for those services that must be paid or guaranteed by the Insurance provider in a different currency, the equivalent in Euros thereof will be applicable at the date of occurrence of the accident.

Age limit:

The coverage of this Insurance shall be enforceable ninety (90) days after the birth of the Insured Person (prior notice thereof) and shall cease at 0:00 am on the day the Insured Person reaches the age of 60, unless at the time of hire he or she were under 60 years of age or whenever otherwise provided in the Particular or Special Conditions.

BASIC
INFORMATION
PRIOR TO THE
CONTRACTING
OF THE
INSURANCE

Right of withdrawal:

We indicate that you have a right of withdrawal of 14 calendar days from the day of the conclusion of the contract, unless it is a contract of less than one month, or that the contract has been executed in its entirety at the request of the subscriber. The exercise of this right must be formalized through a procedure that allows the notification to be recorded by any means permitted by Law, which must be on paper or other durable medium, available and accessible to the Insurer.

Accuracy of information:

The Insurance is contracted on the basis of the information provided by the Contracting Party of the Insurance, the Insured or the Beneficiary, and any other documentation and/or information that is attached with the same contract, which motivate the acceptance of the risk by the Insurer, with the assumption, on his part, of the obligations derived from the contract in exchange for the corresponding price. If, when providing said information, reservation or inaccuracy had been incurred, the contractual balance would be broken. Likewise, fraud, deliberate falsehood or the concealment of information in relation to an incident or event subject to coverage will be grounds for cancellation of the contract. In such a case, the Contracting Party or the Insured Person will lose all rights to receive the compensation that may correspond to them and must return any compensation that the Insurer had already paid. In this case, the Insurer will not reimburse the contribution.

Correction of differences:

If the content of the Insurance differs from the insurance proposal or the agreed clauses, the Insurance Contractor may claim the Insurer within one month from the delivery of the Insurance Contract so that it corrects the existing divergence. After this period without making the claim, the provisions of the Insurance Contract will apply.

Insurance Advice:

The Insurer offers a Telephone Service and Commercial Information channel, where the interested party can receive advice in relation to the insurance contracts that are marketed and the coverage included. Contact information for advice:

- Telephone number: +34 91 770 07 10
- Email: spain@irisglobal.es
- Customer service schedule: from 8 a.m to 17:00 p.m / July and August from 8 a.m to 15:30 p.m.

NEED FOR UPDATE

During the term of the coverage, the Contracting Party or the Insured have the obligation to inform the Insurer about the nature and circumstances of the risk and notify any circumstance known by the Contracting Party or the Insured that may influence the valuation of the same. This obligation is prior to the conclusion of the contract, so the Insurance Contractor must declare to the Insurer, in accordance with the questionnaire that the latter submits, all the circumstances that may influence the risk assessment.

DESCRIPTION
OF THE
INSURANCE
COVERAGES
AND
EXCLUSIONS

Through these coverages, the Insurer undertakes, within the limits and with the conditions established below and in the Particular and Special Conditions, to take charge of the agreed benefits:

Coverage for ALL MODALITIES

Origin and destination SPAIN, EUROPE and/or REST OF THE WORLD (including USA):

A) MEDICAL ASSISTANCE AND TRAVEL ASSISTANCE COVERAGE

COVERAGE	LIMIT	
Medical, pharmaceutical or hospitalization expenses in the country of origin	€ 3.000	
Companion travel expenses	Unlimited	
Expenses for revalidation and physical therapy	€ 1.000	
Face-to-face psychological consultation	€ 100 Session (Max. € 1.000)	
Living expenses for the companion of the hospitalized insured person	€ 200 per day/10 days max.	
Medical expenses of the companion	€ 6.000 Europe / € 12.000 World	
Return expenses of the companion	Unlimited (Max. 3 companions)	
Return of minors	Unlimited	
Transfer or repatriation of mortal remains	Unlimited	
Travel expenses of the companion of mortal remains	Unlimited	
Living expenses of the companion of mortal remains	€ 200 per day /10 days max	
Return of companions of the deceased	Unlimited (Max. 3 companions)	
Search and rescue expenses	€ 2.000	
Loss of keys	€ 60	
Sending of objects forgotten during the trip	€ 200	
Reimbursement of expenses arising from political evacuation or natural disasters	Unlimited	

DESCRIPTION
OF THE
INSURANCE
COVERAGES
AND
EXCLUSIONS

B) TRAVEL AND FLIGHT INCIDENTS COVERAGE

COVERAGE	LIMIT		
Delay in the delivery of checked baggage in public transport	According to modality: More than 6 hours, €300, €500, €1500		
Delay in the means of transport	More than 6 hours € 150 More than 12 hours depending modality €300 or €500		
Loss of connections	According to modality €150 or €300		
Delay of the means of transport due to overbooking	More than 6 hours: € 150		
Cancellation of the means of transport	According to modality €150 or €300		
Early return of the insured person due to the death of a relative	Unlimited		
Early return of the insured person due to hospitalization of a relative	Unlimited		
Early return of the insured member due to a serious loss in the habitual residence or professional premises	Unlimited		
Early return due to declaration of alarm state declaration or border closure notice	Unlimited		
Loss, damage or theft of baggage	According to modality €1,000, €2,000, €3,000		

C) TRAVEL ASSISTANCE SERVICES

COVERAGE	LIMIT
Traveler information service	Included
Medical teleconsultation	Included
Covid 19 travel-oriented individualized medical advice	Included
Remote consultation or medical advice	Included
Healthcare information service	Included
Transmission of urgent messages	Included
Location of lost luggage or personal belongings	Included
Reimbursement of administrative expenses for visa extension	€ 200
Medical and security services through apps	Included

D) PRIVATE CIVIL LIABILITY COVERAGE

COVERAGE	LIMIT	
Private Civil Liability	€ 60.000 maximum per policy and year of € 600.000 (with deductibles of € 60 and € 200 in the USA)	

E) COMPLEMENTARY COVERAGE

COVERAGE	LIMIT
Compensation for the loss of tuition fees	According to modality €1,000, €1,500 and €2,000.
Compensation for missed classes due to illness or accident	According to modality €500, €1,000, €1,500
Death of a family member due to accident	According to modality €1,000, €1,500, €2,000
Resumption of the study travel programme	Included

F) OPTIONAL CONTRACTING COVERAGE

COVERAGE	LIMIT
Death or permanent disability because of accident	From €10,000 to €60,000
Expenses for the cancellation of the study travel programme	From €1,000 to €15,000
Discontinuation of the academic year	From €1,000 to €15,000

Coverage for the modalities of EUROPE, REST OF THE WORLD (including USA), with origin Spain and foreign destination or vice versa, in addition to the PREVIOUS:

A) MEDICAL ASSISTANCE AND TRAVEL ASSISTANCE COVERAGE

COVERAGE	LIMIT		
Medical, pharmaceutical or hospitalization expenses abroad	According to modality: €30,000, €60,000, €250,000, €1,000,000		
Hospitalization medical expenses in the country of origin or residence to continue the care provided abroad	According to modality: €3,000, €6,000,€18,000, €30,000		
Emergency dental expenses abroad	€ 1.000		
Advances in respect of guarantees for hospital fees abroad	According to modality: €30,000, €60,000, €250,000, €1,000,000		
Extension of Stay	€ 150 per day/14 days max.		
Shipment of medications abroad	€ 300		
Sanitary transfer or medical repatriation	Unlimited (Max. € 90,000 for air ambulance worldwide)		
Psychological care in crisis situations during the trip	€ 100 Session (Max. € 1.000)		
Return expenses for hospital discharge	€ 1.000		
Loss or theft of personal documents abroad	€ 300		
Bonds and procedural expenses abroad	According to modality €6,000, €12,000 and €20,000		
Legal assistance abroad	€ 3.000		
Extension of stay in a hotel medical quarantine or alarm state declaration or border closure notice	€ 60 per day / 15 days max		

B) TRAVEL ASSISTANCE SERVICES

COVERAGE	LIMIT
Help with Administrative Procedures due to hospitalization abroad	Included

EXCLUSIONS:

The limit will be the one indicated in the Particular Conditions.

1. Exclusions applicable to Medical Assistance and Travel Assistance Coverage:

Excluded are events arising from:

- a) Pre-existing and/or congenital illness, chronic conditions or ailments under medical treatment prior to the departure, except as provided in the "Medical Expenses" guarantee.
- b) General medical examinations, check-ups and any visit or treatment concerning preventive medicine, in accordance with the generally accepted medical criteria.
- Trips aimed at receiving medical treatment, or subsequent to the diagnosis of a terminal illness.
- d) Diagnosis, monitoring and treatment of pregnancy, voluntary termination thereof and childbirth.
- e) Burial and ceremony expenses as well as the cost of the coffin in the transfer or repatriation of mortal remains coverage.
- f) Treatment, diagnosis and rehabilitation of mental or nervous disorders.
- g)) Purchase, implantation, replacement, extraction and/or repair of prostheses of any type, such as pacemakers, stimulators, anatomical, orthopedic or dental pieces, orthotics and osteosynthesis materials (including natural bone substitutes, phospho-calcium ceramics, phospho-calcium cement, calcium sulfate, collagen, osteoinductive materials, demineralized bone matrix, bone morphogenetic protein and growth factors), breast prostheses, intraocular and extraocular lenses, hearing aids, crutches; valvular and vascular prostheses ("bypass" and stents); Any other expense related to any non-autologous implantable, active, synthetic or biological product, material or substance, not included in the previous list.
- h) Odontological, ophthalmological and otorhinolaryngological treatments, except in cases of emergency.
- i) Special treatments, dialysis, experimental surgeries, plastic or restorative surgery and those not recognized by western medical science.
- j) When the accident or illness occurs abroad, any medical expenses incurred in Spain that correspond to a treatment prescribed or initiated abroad, except for the provisions of the guarantee "Hospitalization expenses in Spain for continuity of care abroad".

2. Exclusions applicable to Travel and Flights Incidents Coverage:

The following are not covered by this Contract:

- a) Goods, travel tickets, cash money, stamp collections, titles of any nature, documents in general and securities on paper, tapes and/or memory disks, documents recorded on magnetic stripe or film tapes, and collections.
- b) Petty theft. It is understood as the theft act committed without being noticed, without violence or intimidation of persons or the use of force on objects.
- c) Damage due to normal or natural wear and tear, inherent defect and inadequate, insufficient or unidentified packaging, as well as fragile luggage or perishable goods. Damage produced by environmental or weather influences.
- d) Objects, not entrusted to a carrier, that have simply been lost or forgotten.
- e) Theft during a stay in camping and caravan, in a free camping site, or in any non-fixed, mobile or transportable accommodation, excluding valuable items.
- f) The damage, loss or theft of objects and personal effects that have been left unattended in a public place or in a place made available to several occupants.
- g) Damage caused directly or indirectly by strikes, earthquakes and radioactivity.
- h) Damage caused intentionally by the Insured Person or because of gross negligence and those caused by spillage of liquids that are inside the baggage.
- i) All motor vehicles, as well as their parts and accessories.
- j) Coverage of delay or cancellation produced as a result of a strike or labor dispute is excluded.

3. Exclusions applicable to Private Civil Liability Coverage:

The following are not covered by this Contract:

- a) Any type of Responsibility that corresponds to the Insured Person for driving a motor vehicle, aircraft or boat, as well as for the use of firearms.
- b) Civil Liability derived from any professional, political or associative activity.
- c) Fines or penalties imposed by courts or authorities of any kind.
- d) The Responsibility derived from the practice of a professional sport as well as the following modalities, (even amateur practice), mountaineering, boxing, bobsleigh, caving, judo, parachuting, hang gliding, gliding, polo, rugby, shooting, yachting, martial arts and those practiced with motor vehicles.
- e) Damage to objects entrusted by any title to the Insured Person.

- f) Civil Liability derived from the ownership or possession of animals, swimming pools, fuel tanks, etc.
- g) Civil Liability derived from corporate, union or community activities.
- h) Civil Liability derived from the ownership and/or possession of weapons and motor vehicles.
- i) Civil Liability for temporary accommodation of minors, friends, etc.
- j) Civil liability for damages to goods that have been entrusted.

4. Exclusions applicable to Accident Coverage:

In addition to those mentioned under the section of the exclusions generally applicable to Medical and Travel Assistance coverage, the following are excluded from the contract:

- a) Accidents caused by states of mental alienation, paralysis, apoplexy, epilepsy, diabetes, alcoholism, drug addiction, spinal cord diseases, syphilis, AIDS (except as provided in the Second Medical Opinion guarantee if contracted), encephalitis, and, in general, any injury or illness that impairs the physical or mental ability of the Insured Person.
- b) Diseases, hernias, lumbago, heart attacks, intestinal strangulations, complications of varicose veins, poisonings or infections that do not have as direct and exclusive cause an injury included within the insurance guarantees. The consequences of surgical operations or unnecessary treatments for the healing of accidents suffered and those belonging to the care of the person himself.
- c) Injuries suffered from accidents resulting from the use of two-wheeled vehicles with a cylinder capacity exceeding 75 c.c.
- d) Injuries that occur in the exercise of professional activity with aggravated risk. This exclusion may be repealed prior express authorization of the Insurance provider and by applying a surcharge.
- e) Situations of aggravation of an accident occurring prior to the formalization of the Contract are not included.

5. Exclusions applicable to Expenses for the Cancellation of the Study Travel Programme Coverage:

Travel cancellations originated due to the following shall not be covered:

- a) Cures, aesthetic treatments, contraindication or lack of vaccination, contraindication to fly, the impossibility of following medical treatment at the place of destination, voluntary termination of pregnancy, alcoholism and illegal drug use.
- b) Mental, nervous or psychiatric illnesses, depressions that do not involve hospitalization, or with a hospitalization period of fewer than seven days.
- c) Diseases or illnesses prior to the reservation of the trip, as well as its consequences, unless it forces hospitalization for more than 24 hours and with a medical discharge date at least 7 days prior to the start date of the trip, except as indicated in points 1.3. and 1.5.
- d) In general, all cancellations for causes prior to the time of contracting that were known to the Insurance contracting party and/or Insured person.

- e) Participation in fights, crimes, bets, contests, competitions, except in cases of selfdefense established by a Court.
- f) Restrictions related to the mobility of the Insured person imposed by the governments or competent health authorities in situations of quarantine, epidemics or pandemics, both at the country of origin of the insured person and at the destination, which make it impossible to start the trip.
- g) Conscious breach of official prohibitions.
- h) The non-presentation, for any reason, of the indispensable documents in every trip, such as passport, visa, flight tickets or vaccination certificates.
- Intentional acts, as well as self-harm, caused intentionally, suicide or attempted suicide.
- j) Events caused by radiation from nuclear transmutation or decay or radioactivity, as well as those derived from biological or chemical agents.

6. Exclusions applicable to Discontinuation of the Academic Year Coverage:

The following lack coverage in this insurance:

- a) Early returns that have not been communicated to the Insurance provider and that have not been made by or with its agreement, except in cases of force majeure or proven material impossibility.
- b) Events under coverage intentionally caused by the Insured person, the Insurance Contracting Party, the Beneficiaries or persons traveling with the Insured person.
 - c) Any reimbursement requested in those cases in which the return of the Insured person occurred on the date scheduled for the end.
 - d) Illnesses or injuries that occur as a result of chronic or pre-travel conditions (except worsening or decompensation of a chronic disease during the trip).
 - e) Psychiatric and mental illnesses and depression without hospitalization.
 - f) Illnesses or injuries that occur in the exercise of the professional activity of aggravated risk.
 - g) Voluntary acts, as well as intentional self-harm, suicide, or suicide attempt.
 - h) Treatment, diseases or pathological states produced by ingestion or administration of toxins (drugs), alcohol, narcotics or by the use of medicines without medical prescription.
 - i) Births.
 - Pregnancies, except for unforeseeable complications during the first 24 weeks of gestation.
 - k) Participation in bets, duels, crimes, fights, except in cases of legitimate defense.
 - I) Terrorism.

- m) Aesthetic treatments, periodic reviews, cures, contraindications for air travel, vaccinations, the impossibility of following the recommended preventive medicinal treatment in certain destinations, the voluntary interruption of pregnant.
- n) The non-presentation, for any reason, of the necessary documents in any trip, such as passport, visa, tickets, ID or vaccination certificate.
- O) Covered events that are caused by radiation from nuclear transmutation or decay or radioactivity, as well as those derived from biological or chemical agents.
- p) Public Health Emergency of International Relevance.

8. General Exclusions:

Damages, situations or expenses, which are a consequence of the following, are not covered by this contract:

- a) Services that have not been previously communicated to the Insurance provider and those for which agreement of the latter has not been obtained, except in cases of duly accredited material impossibility.
- b) If the Insured Person refuses to be transferred or repatriated at the time or under the conditions determined by the medical service of the Insurance provider, all coverage contained in the contract and the resulting expenses shall be automatically suspended as a result of that decision.
- c) The expenses incurred once the Insured person is at the usual place of residence, those incurred outside the scope of application of the insurance coverage, and in any case, once the dates of the trip object of the contract have concluded, except for what is indicated in the Medical Expenses coverage.
- d) Those derived from the professional or remunerated practice of any sport (including training), as well as those that occur during the participation of the Insured Person in competitions of any type and in any case the practice of the following modalities even if amateur: motorsports, mountaineering, canyoning, climbing, caving, hunting, skiing and/or winter sports, gymnastics, bungee jumping, water sports, underwater and diving, the use of light aircraft and any other sports involving aerial risk (such as parachuting, hang gliding, ballooning, etc.), horse riding, boxing, any form of wrestling, martial arts, bullfighting, "capeas", bull runs and the participation in any other bullfighting show; and, in general, any sport or recreational activity of a notoriously dangerous or high-risk nature.
- e) The use, as passenger or crew member, of means of air or maritime navigation (unless traveling as a paying passenger on a regular flight) not authorized for public passenger transport, as well as helicopters.

- f) The rescue in mountains, chasms, seas, jungles or deserts, in unexplored regions, except as provided in the coverage "Search and Rescue Expenses". Trips aimed at exploration or by submarine are excluded.
- g) Those caused directly or indirectly by the bad faith of the Insured Person, by their participation in criminal acts, or by their intentional, seriously negligent or reckless actions. Participation of the Insured in bets and/or challenges disputes and/or quarrels except for legitimate self-defense or in an attempt to save people or property. Fraudulent acts of the Contracting Party, Insured Person, Beneficiary or their family members, as well as suicide or attempted suicide.
- h) The consequences of the actions of the Insured Person in a state of mental alienation or under psychiatric treatment, drunkenness or under the effects of drugs or narcotics of any kind are not covered. For these purposes, it will be considered that there is drunkenness when the Insured person, medical professional or competent authority declares it or when the Insured person refuses to undergo the alcohol or toxicology test.
- i) Incidents derived from armed conflict or war, even if not declared, terrorism, rebellion, revolution, invasion and insurrection, the use of military power or usurpation of government or military power, riots, popular riots, earthquakes, seismic movements, floods, hurricanes, tsunamis, volcanic eruptions and other phenomena of extraordinary character or events that due to their magnitude and severity are classified as a catastrophe or national calamity, notwithstanding that they are covered by the Extraordinary Risks coverage, as well as the damages caused, directly or indirectly, by nuclear, radioactive, chemical or biological exposure or contamination. Events in which coverage corresponds to the Insurance Compensation Consortium are excluded in any case.
- j) Incidents derived from the waiver or delay, by the Insured Person or Persons responsible for him/her, of the services proposed by the Insurance provider and/or agreed by the Medical Service of the latter.
- k) The consequences of surgical interventions or treatments that are unnecessary for the cure of an accident or illness covered by this Insurance contract.
- The Insurance Provider is relieved of responsibility when due to force majeure it cannot carry out any of the benefits specifically provided for in this Insurance contract.
- m) Unless expressly agreed otherwise, the events that occurred in countries that, at the beginning of the trip, are at war, declared or not, or in armed conflict are not covered.
- n) The Insurance provider shall not grant cover and therefore shall not be liable for any compensation or indemnity when such compensation or indemnity exposes the Insurance provider to any sanction, prohibition or restriction in accordance with the resolutions issued by the United Nations or by virtue of laws, regulations or trade and/or economic sanctions of the European Union, the United Kingdom or the United States of America.

The Insurance provider, by the reception of the corresponding supplementary premium, may consider some of the excluded risks described as covered, provided that it is expressly stated in the Particular or Special Conditions.

Geographic scope: he coverage of this insurance takes effect in the worldwide, being valid for some or other countries according to the option indicated in the Conparticular conditions.

Deductible: In the Private Civil Liability coverage, there is an amount payable by the Insured that will be applicable per event that occurs, as well as the maximum guaranteed capital per contract and year, which is established in the Particular Conditions.

Extraordinary risks or risks covered by the Insurance Compensation Consortium (CCS): In accordance with the provisions of the consolidated text of the Articles of Association of the Insurance Compensation Consortium, approved by Royal Legislative Decree 7/2004, of October 29, the Contracting Party of an insurance contract which must include a surcharge in favor of the aforementioned public business organization has the power to agree on the coverage of extraordinary risks with any insurance company that meets the conditions required by current legislation.

The compensations derived from events caused by extraordinary incidents, occurred in Spain or abroad, whenever Spain is the place of usual residence of the Insured person, shall be paid by the Insurance Compensation Consortium when the insurance contracting party has paid the corresponding surcharges in his favor and any of the situations included within what is described in the corresponding section in the General Conditions occur.

he request for compensation of damages whose coverage corresponds to the Insurance Compensation Consortium, will be made by means of communication to the same by the Contracting Party of the Insurance, the insured or the beneficiary of the insurance contract, or by whoever acts on behalf and name of the previous ones, or by the insurance company or the insurance mediator with whose intervention the insurance had been managed, informing the Insurance Compensation Consortium of the damages and obtaining any information related to the procedure and the status of processing of the covered events, which is will have the following channelss:

- By contacting the Call Center of the Insurance Compensation Consortium (900 222 665 o 952 367 042).
- Through the website of the Insurance Compensation Consortium (www.consorseguros.es)

THE EVENT WITH/WITHOUT COVERAGE

A) How to apply for a coverage:

After an event that may be covered by any of the insurance coverage, it is an essential requirement that the Insured person, his / her relatives, companions or a person they trust immediately contact the Insurance provider, by calling the Assistance Center, telegram, fax or email to the numbers or addresses indicated in the Particular Conditions or through the app.

In the case of force majeure that prevents this notification, it must be done as soon as the circumstances that prevented the communication cease.

Once contact has been established, the Insured person, or failing that the caller, shall indicate the number of the Insurance contract, the place where the Insured person is located and a contact telephone number or email address, informing about the details of the events and describing the assistance requested. The Insurance provider shall provide a file number and shall immediately put into operation the mechanisms available to it in order to provide the required service.

THE EVENT WITH/WITHOUT COVERAGE

The Insurer is not responsible for delays or breaches due to force majeure or related to special administrative or political characteristics of a particular country. In any case, if direct intervention of the Insurance provider is not possible, the Insured Person shall be reimbursed upon return to Spain, or if necessary, as soon as he/she is in a country where the previous circumstance does not exist, of the expenses incurred, whenever they are guaranteed by the presentation of the corresponding supporting documents.

The medical and health transport services must be carried out with the previous agreement of the physician who treats the Insured Person with the medical equipment of the Insurer.

For coverage of incidents in travel and flights, the Insured person must submit a written claim to the Carrier and shall assign to the Insurance provider his / her right to receive the compensation to be paid by the Carrier before receiving the corresponding compensation for the aforementioned coverage.

The Insured Person shall not be entitled to any compensation when he deliberately uses improper documents or fraudulent means, presents incomplete, inaccurate, exaggerated or fraudulent declarations regarding covered events or when causes are concealed and consequences magnified.

In accordance with the provisions of art. 16 of the Insurance Contract Law (Law 50/1980), the Insurance Contracting Party or the Insured person must also facilitate the Insurance provider all kinds of information regarding the circumstances and consequences of the event. For this, the Insurance Contracting Party or Insured person shall provide all the documents that are required by the Insurance provider.

B) Reimbursement of expenses:

The Insurance provider shall reimburse the expenses incurred by the Insured person to be able to receive the assistance provided for in the contract only when he/she has been previously informed of it, and provided that the Insured person provides the original documentation that confirms having made the payment.

In no case shall the provision of service be replaced by compensation, unless expressly agreed.

C) Rejection of the event and denial of coverage:

In the event that the provision of coverage is not appropriate under the coverages of the insurance contract, the Insurer will notify the Insured of the reasons for reheap of coverage.

8

CONDITIONS, TERMS AND EXPIRATION OF THE PRICE OF THE INSURANCE

A) Period of validity of the insurance and its price:

The Insurance will have the duration indicated in the Particular Conditions, and the coverage will come in effect at the time and date indicated in the Particular Conditions, provided that the Insurance has been signed, and the first payment has been made payment. Those Insurances whose duration is annual will be tacitly extended at their end date for successive annual installments, unless one of the parties opposes its extension by means of a written notification addressed to the party effected within a period of two months prior to the conclusion of the contract. current period, if it is exercised by the Insurer, and one month if it is done by the Insurance Contracting party.

B) Concepts integrated in the price:

The legally applicable surcharges and taxes are included in the price of the insurance that has been paid.



INSTANCES OF CLAIM

A) Procedure for filing complaints or claims:

This company, in accordance with the provisions of Order ECO / 734/2004, offers its Insured members a Customer Service Department, which shall serve, within a maximum period of two months from the date of presentation, in writing, all complaints and claims that might arise from the underwriting of the insurance contracts uro.

To do this, complainants may contact the Customer Service Department via:

- Email sac@irisglobal.es
- · web www.irisglobal.es
- postal mail sent to any of our headquarters in Madrid (C / Julián Camarillo, 36, CP 28037) or Barcelona (Avenida Diagonal 453, bis, 2°B, CP 08036) or in person at our offices, during business hours.

The claim must state:

- Name, last names and domicile of the interested party or the person representing him/ her, NIF for physical persons and data referring to the public registry, if it is a legal entity.
- Reason for the claim or complaint.
- Office or offices, department or service where the facts object of the complaint or claim have occurred.
 - That the claimant is not aware that the subject matter of the complaint or claim is being substantiated through an administrative, arbitration or judicial procedure.
 - Place, date, signature and copy of official ID (ID, passport or similar).

A Claim is understood to be: a demand presented by the Insurance Contracting Party, the Insured Persons or the Beneficiaries that demonstrate the intention of obtaining the restitution of their interest or right, specific facts related to actions or omissions of the Company which, in their opinion, pose a disadvantage to the claimant, insofar as his or her interests or rights due to breach of contract, the rules of transparency and protection of customers or to good practice and use.

A Complaint is understood to be: a complaint related to the operation of the services provided to the Insured Persons by the Insurance provider and presented by delays, disregard or any other type of action that is observed in the operation of the company.

In the event that the resolution issued by our Customer Service Department does not meet the expectations of the claimant, or is not carried out within the two-month period mentioned above, it may be formulated before the Claims Service of the Directorate General of Insurance and Pension Funds.

B) Protection of personal data:

Detailed information on data protection is available in the General Conditions of your insurance contract, as well as our Privacy Policy at the following link:

https://www.irisglobal.es/documentos/politica-privacidad-seguros

- Law 50/80 of October 8th, of insurance contract. - Law 20/2015, of July 14, on management, supervision and solvency of insurance and reinsurance companies. **APPLICABLE** - Royal Decree 1060/2015, of November 20, on the Management, Supervision and Solvency of Insurance and Reinsurance Entities. **LEGISLATION** - DIRECTIVE (EU) 2016/97 OF THE EUROPEAN PARLIAMENT AND OF THE COUNCIL of 20 January 2016 on insurance distribution. - Royal Decree-Law 3/2020, of February 4, on urgent measures incorporating various European Union directives in the field of public procurement in certain sectors into the Spanish legal system; private insurance; pension plans and funds; of the tax field and tax litigation. In remote contracting: - Law 22/2007, of July 11, on distance marketing of financial services intended for consumers. - Law 34/2002, of July 11, on services of the information society and electronic commerce. The report on the financial situation and solvency of IRIS GLOBAL Soluciones de Protección Seguros y Reaseguros S.A.U. regulated in article 80 of Law 20/2015, of July 14, is accessible: **FINANCIAL AND** https://irisglobal.es/corporativo/sobre-iris-global/situacion-financiera-solvencia **SOLVENCY SITUATION** OF THE INSURANCE **COMPANY** The employees of the Insurer, in relation to the insurance contract that it markets, may have a Fixed Remuneration, a Variable Remuneration or a Remuneration in Kind, in compliance with current legislation, and/or the agreements that are applicable, in addition of its review according to the evaluation of the annual performance of the Insurer on its workers. **ABOUT REMUNERATION** Finally, we inform you that in accordance with the Code of Ethics, it is prohibited for OF EMPLOYEES IN the Insurer's employees to request, accept or offer personal gifts or hospitality, in a **RELATION TO THE** way that generates a conflict of interest. Gifts of money, regardless of amount, may **INSURANCE CONTRACT** not be given or received. According to the gifts or gifts that an employee can receive, or depending on his responsibility, make, it cannot exceed the sum of 150.-€

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PRIOR INFORMATION FROM THE INSURANCE BROKER

(to be completed by the Broker)

Identity and address:

[NOTE: Indicate the corresponding supervisory authority to which the activity is subjec.]

□ ves □ No

Insurance intermediary status:

Advice on the product by the broker:

o receive advice on the product from the mediator, you have the following channels:

- Phone:
- Email:

PRIOR INFORMATION FROM THE INSURANCE BROKER

(a cumplimentar por el mediador)

Schedule of attention:

For more information on counseling, see Point 5.

Information on complaints and claims:

The Procedure for the formulation of complaints or claims of Point 9, is also applicable to the broker.

Processing of personal data:

The insurance broker acts as (co-responsible/in charge) of the processing of the personal data collected on the occasion of the formalization of the insurance contract, with the Insurer IRIS GLOBAL being (also) responsible for the processing.

For more information about the treatment that the broker gives to the personal data that it provides, you can access: (link, to be completed by the broker)

Registration information:

Position toward	ds the cl	ient or	insurer
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("v) if the intermediary represents the client or acts in the name and on behalf of the insurance company")

Does the insurance intermediary own a direct or indirect participation of 10% or more of the voting rights or capital of the Insurance company?

yes	No
· ·	ular insurance company or parent company own a direct or of 10% or more of the voting rights or capital of the insurance
Yes	☐ No

En caso de que haya habido asesoramiento: [Si NO ha habido asesoramiento, NO aplica]

a)	Has the advice been objective and	personalized	Yes	No
b)	Is the insurance intermediary oblige	ed to distribute insu	ırance exclus	ively with one
	or several entities?	Yes	No	

In case of NOT carrying out insurance distribution activities exclusively with one or more companies:

With which insurance companies can the insurance intermediary carry out any activity insurance life? (Specify)

Information on the remuneration received with the insurance contract:

a) In exchange for a fee (remuneration is paid directly by the client)

PRIOR INFORMATION FROM THE INSURANCE BROKER

(a cumplimentar por el mediador)

- b) In exchange for a commission of some kind (the remuneration is included in the insurance price)
- c) In exchange for any other type of remuneration

[NOTE: If it is one of a combination of the previous remunerations, choose the corresponding options]

About the remuneration of those who work for the intermediary: (Choose option)

- a) In exchange for a fee (remuneration is paid directly by the client)
- b) In exchange for a commission of some kind (the remuneration is included in the insurance price)
- c) In exchange for any other type of remuneration

[NOTE: If it is one of a combination of the previous remunerations, choose the corresponding options]

Commission Information:

[NOTE: Specify if the client makes, under the insurance contract, any payment other than regular contributions and expected payments]