Member organisations of Parentkind 0010529818

American International Group UK Limited Lifeline Plus Group Personal Accident & Travel Policy

Policy Schedule (New)

Lifeline Plus Policy Wording 0321

American Interna	ational Group UK Limit	ed	Policy Number: 0010529818
Insured:	Member organisation	s of Parentkind	
Address:	16 Old Queen Street		
	London SW1H 9HP		
Broker:	Marsh Commercial		Code: DR4662
Business Description:	: Membership associati	on for PTAs	
Period of Insurance :		And for any subsequent	
From:	01 November 2024	period for which a premium	
То:	31 December 2025	is paid and accepted.	
Renewal Date:	01 January 2026		
Any One Accident Lim Scheduled Aircraft Ac	cumulation Limit	£ 5,000,000 £ 50,000,000	Date Produced : 14 October 2024
Non – Scheduled Aircr	aft Accumulation Limit	£ 5,000,000	

Categ	ory:	A		
_	ed Persons:	Directors or Principals and Employees of the Insure	ed	
Opera	ative Time:	OP2 - All Occupational Related Covers		
Sectio	on A:	Personal Accident Cover		
Item	Description		Sum Insured	Max Individual Limit
1	Death		£25,000	
2	Loss of sight in	one eye or loss of one limb	£25,000	
3a	Loss of sight in one eye and lo	both eyes or loss of two or more limbs, or loss of sight in ss of one limb	£25,000	
3b	Loss of speech		£25,000	
3c(i)	Loss of hearing	g in both ears	£25,000	
3c(ii)	Loss of hearing	g in one ear	25% of 3c(i)	
4a	Permanent Tot	al Disablement	£25,000	
4b	Permanent Par	rtial Disablement	Yes	
5	Temporary Tot	al Disablement	£200	
	Deferment Per	iod o week(s) Benefit Period 104 week(s)	per week	
6	Temporary Par	tial Disablement	£80	
	Deferment Per	iod o week(s) Benefit Period 104 week(s)	per week	
7		cal Expenses incurred in connection with a valid claim under items paid under items 1 - 4b or 30% under items 5 and 6 whichever is the rson.	-	<u> </u>

Categ	ory:	В		
Insure	ed Persons:	Volunteers of the Insured		
Opera	ative Time:	NSOTo2 - Non-employees (See Non Standard Oper	ative Times Section f	for full definitions)
Sectio	on A:	Personal Accident Cover		
Item	Description		Sum Insured	Max Individual Limit
1	Death		£25,000	
2	Loss of sight i	n one eye or loss of one limb	£25,000	
3a		n both eyes or loss of two or more limbs, or loss of sight in oss of one limb	£25,000	
3b	Loss of speed	h	£25,000	
3c(i)	Loss of hearin	g in both ears	£25,000	
3c(ii)	Loss of hearin	g in one ear	25% of 3c(i)	
4a	Permanent To	otal Disablement	£25,000	
4b	Permanent Pa	artial Disablement	Yes	
5	Temporary To	otal Disablement	£50	
	Deferment Pe	riod o week(s) Benefit Period 104 week(s)	per week	
6		rtial Disablement riod Nil week(s) Benefit Period Nil week(s)	Nil	
7		ical Expenses incurred in connection with a valid claim under items naid under items 1 - 4b or 30% under items 5 and 6 whichever is the erson.	•	•

Section C:	Crisis Containment Management		
Insured Persons:	The Insured		
Operative Time:	Period of Insurance shown in the Schedule		
Item		Sum Insured	
1 Crisis Contain	ment Management (aggregate limit)	£50,000	

Section D:	Virtual Medical Care
Insured Persons:	Any person shown on the Schedule as being an Insured Person or their Partner or their Child or Children
Operative Time:	24 hours during the Period of Insurance shown in the Schedule
Item	
	ation and Expert Case Management provided; y, 7 days a week.

Memoranda Forming Part of Policy 0010529818

Date Produced: 14 October 2024

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Special

In respect of Category B:

Out of Pocket Expenses

It is hereby noted and agreed that the Sum Insured specified under Item 5 of Section A – Personal Accident as shown in the Schedule is limited the amount shown or £50 per week, whichever is the lesser, for incidental costs incurred for Out of Pocket Expenses as a consequence of accidental bodily injury resulting in Temporary Total Disablement.

In respect of Loss of Earnings for Insured Persons in gainful employment the Sum Insured specified under Item 5 of Section A – Personal Accident as shown in the Schedule is limited to the amount shown and the benefit payable shall not exceed 100% of the Insured Person's gross weekly wage

No benefit will be payable under Item 6 as shown in the Schedule.

Out of Pocket Expenses is defined as:

Additional costs incurred by an Insured Person for food and drink expenses, telephone calls and taxi fares as a result of an accidental bodily injury.

Non Standard Operating Times Forming Part of Policy 0010529818

Date Produced: 14 October 2024

A&HGPANSOT 02 NON-EMPLOYEES – OFFICIAL DUTIES INCLUDING COMMUTING

While an Insured Person is carrying out their official duties for the Insured.

At any time while an *Insured Person* is on the *Insured's* premises to carry out their official duties for the *Insured*.

While an *Insured Person* is travelling between their place of residence and place of work for the *Insured*. While an *Insured Person* is travelling between their places of work for the *Insured* where the travel is at the expense of the *Insured*.