

It is understood and agreed between the Policyholder and the Company that the name of the Company on the Face Page of this policy is amended to read as follows effective June 30, 2012:

Industrial Alliance Insurance and Financial Services Inc.

It is further understood and agreed that the words "Head Office" in **NOTICE AND PROOF OF CLAIM** under **GENERAL PROVISIONS** of this policy is amended to read: "Division Headquarters" and not as previously written effective June 30, 2012.

It is also understood and agreed that **DEFINITIONS** of this policy is amended to include the following effective June 30, 2012:

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

It is further understood and agreed that **APPENDIX 1** of this policy is amended to read as follows effective June 30, 2012:

APPENDIX 1

PRIVACY POLICY

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

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

PERSONAL INFORMATION

Personal Information is any information about an individual that identifies him or her, such as financial, lifestyle or health information, but not their name, title or business address, telephone or email. Personal information has to be protected regardless of its characteristics or its form, whether written, graphic, audio, visual, computerized or any other form.

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

Attached to and forming part of Policy No. 100006766 of INDUSTRIAL ALLIANCE INSURANCE AND FINANCIAL SERVICES INC. issued to URBAN SCHOOL INSURANCE CONSORTIUM

Jeremy Lyden

Registrar

Continued...

APPENDIX 1 (Continued...)

PRIVACY POLICY (Continued...)

PURPOSE OF INFORMATION COLLECTION

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

The purposes for which the Company collects personal information about the Individual are identified at or before the time of collection. For example, information may be collected while submitting an application, opening an account, or submitting a claim. Purposes for collecting information generally include providing products or services requested, confirming the Individual's identity, protecting against fraud, or dealing with matters concerning the relationship between the Company and the Individual.

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

CONSENT

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

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

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

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

Attached to and forming part of Policy No. 100006766 of INDUSTRIAL ALLIANCE INSURANCE AND FINANCIAL SERVICES INC. issued to URBAN SCHOOL INSURANCE CONSORTIUM

Jeremy Lyden

Registrar

Continued...

APPENDIX 1 (Continued...)

PRIVACY POLICY (Continued...)

CONSENT (Continued...)

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

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

LIMITS TO COLLECTION, USE AND DISCLOSURE

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

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

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

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

Attached to and forming part of Policy No. 100006766 of INDUSTRIAL ALLIANCE INSURANCE AND FINANCIAL SERVICES INC. issued to URBAN SCHOOL INSURANCE CONSORTIUM

Jeremy Lyden

Registrar

Continued...

APPENDIX 1 (Continued...)

PRIVACY POLICY (Continued...)

LIMITS TO COLLECTION, USE AND DISCLOSURE (Continued...)

The Individual's personal information is only accessible to certain authorized persons, and only to the extent necessary to perform their duties. The Individual has the right to know, on request to whom the information was disclosed. Only in rare instances is the Company prevented by law from making such disclosure. The Company maintains accurate records, recording to whom it discloses personal information and in what circumstances the information was disclosed.

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

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

RETENTION

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

CLIENT LIST

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

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

Attached to and forming part of Policy No. 100006766 of INDUSTRIAL ALLIANCE INSURANCE AND FINANCIAL SERVICES
INC. issued to URBAN SCHOOL INSURANCE CONSORTIUM

Jeremy Lyden

Registrar

Continued...

APPENDIX 1 (Continued...)

PRIVACY POLICY (Continued...)

CLIENT LIST (Continued...)

The Company does not sell client lists to third parties.

ACCURACY

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

ACCOUNTABILITY

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

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

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

SAFEGUARDS

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

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

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

Attached to and forming part of Policy No. 100006766 of INDUSTRIAL ALLIANCE INSURANCE AND FINANCIAL SERVICES INC. issued to URBAN SCHOOL INSURANCE CONSORTIUM

Jeremy Lyden

Registrar

Continued...

APPENDIX 1 (Continued...)

PRIVACY POLICY (Continued...)

REQUEST FOR ACCESS TO INFORMATION AND AMENDMENTS

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

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

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

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

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

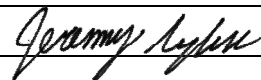
Any request for access to information or request for amendment must be sent to the following address:

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

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

Attached to and forming part of Policy No. 100006766 of INDUSTRIAL ALLIANCE INSURANCE AND FINANCIAL SERVICES INC. issued to URBAN SCHOOL INSURANCE CONSORTIUM



Registrar

Continued...

APPENDIX 1 (Continued...)

PRIVACY POLICY (Continued...)

COMPLAINTS AND CONCERNS

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

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

It is also understood and agreed that **LEGAL ACTION** under **GENERAL PROVISIONS** of this policy is amended to read as follows effective July 1, 2012:

LEGAL ACTION

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

Every action or proceeding against an insurer for the recovery of insurance money payable under the contract is absolutely barred unless commenced within the time set out in the Insurance Act or other applicable legislation.

It is further understood and agreed that **DEFINITIONS** of this policy is amended to include the following effective July 1, 2012:

"**Insurance Act**" whenever used in this policy means the applicable insurance legislation in the applicable provincial jurisdiction.

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

Attached to and forming part of Policy No. 100006766 of INDUSTRIAL ALLIANCE INSURANCE AND FINANCIAL SERVICES INC. issued to URBAN SCHOOL INSURANCE CONSORTIUM

Jeremy Lyden

Registrar

It is understood and agreed between the Policyholder and the Company that **TRIP CANCELLATION** specified under **PLAN 2** of this policy is amended to read as follows effective September 1, 2012:

TRIP CANCELLATION

In the event that the Insured Person is unable to undertake or continue the scheduled trip as a result of a teacher strike, Travel Advisory or International SOS security alert, or the Injury, Sickness or death of the Insured Person or a Member of the Immediate Family, the Company will reimburse the Insured Person the non-refundable, pre-paid travel arrangements which are non-refundable on the day when the covered reason for cancellation occurs.

It is further understood and agreed that **DEFINITIONS** of this policy is amended to include the following effective September 1, 2012:

“**Travel Advisory**” whenever used in this policy means a formal written travel advisory and/or travel warning issued by the Department of Foreign Affairs and International Trade Canada (DFAIT) or Public Health Canada (PHC) recommending that, on the Insured Person’s scheduled departure date, the Insured Person avoid all travel or avoid non-essential travel to the scheduled destination. The travel advisory/warning must be issued after the date the trip is booked or after the effective date of this policy, whichever is later, and must still be in effect on the Insured Person’s scheduled departure date.

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

Attached to and forming part of Policy No. 100006766 of INDUSTRIAL ALLIANCE PACIFIC INSURANCE AND FINANCIAL SERVICES INC. issued to URBAN SCHOOL INSURANCE CONSORTIUM

Cheyenne Grendl

Registrar



It is understood and agreed between the Policyholder and the Company that **REPATRIATION, BOARD, LODGING AND ADDITIONAL TRAVEL EXPENSES** specified under **PLAN 1** of this policy is amended to read as follows effective September 1, 2011:

REPATRIATION, BOARD, LODGING AND ADDITIONAL TRAVEL EXPENSES

In the event of: (a) the death of the Insured Person, (b) the Injury or Sickness of the Insured Person and certified as medically necessary by the attending Physician, (c) the death of a Member of the Immediate Family, (d) the Injury or Sickness of a Member of the Immediate Family certified by the attending Physician to be of a severity requiring the attendance of the Insured Person, the Insured Person requires transportation to his place of Residence, the Company will pay the necessary actual expense incurred for such transportation, less any refund due as the result of cancellation or rescheduling of transportation previously arranged.

In the event of (a) the death of the Insured Person or (b) the Injury or Sickness of the Insured Person certified by the attending Physician to be of a severity requiring the attendance of a medical attendant, chaperone or Member of the Immediate Family, the Company will pay the reasonable board, lodging and additional travel expenses incurred by such medical attendant, chaperone or Member of the Immediate Family to remain with the Insured Person or accompany the Insured Person on return to his place of Residence. Board and lodging expenses are restricted to a maximum of \$100.00 per day and for a maximum period of 30 consecutive days. All benefits payable for such board, lodging and additional travel expenses are limited to an aggregate of \$5,000.00 as the result of any one Injury, Sickness or death. Additional travel expenses are restricted to the round-trip economy airfare for a Member of the Immediate Family or medical attendant (not accompanying the Insured Person prior to such Injury, Sickness or death) and the one-way economy airfare for a chaperone.

The total of all benefits payable under this part shall not exceed an aggregate amount of \$10,000.00 as the result of any one Injury, Sickness or death.

It is further understood and agreed that **PLAN 2** of this policy is amended to include the following effective September 1, 2011:

TEMPORARY TRIP INTERRUPTION

In the event Injury, Sickness or quarantine of the Insured Person after departure temporarily prevents the Insured Person from continuing the trip, the Company will pay the reasonable cost of transportation by the most direct route to allow the Insured Person to rejoin the original tour or group.

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

Attached to and forming part of Policy No. 100006766 of INDUSTRIAL ALLIANCE PACIFIC INSURANCE AND FINANCIAL SERVICES INC. issued to URBAN SCHOOL INSURANCE CONSORTIUM

Registrar

It is also understood and agreed that Section 3 of this policy is amended to read as follows effective September 1, 2011:

Section 3 - Premium - The premium for the term of this policy is calculated at the following rates per participating school board:

Option 1 - Plan 1

\$.20 per Insured Person per annum, excluding chaperones
Chaperones - \$100.00 per annum

Option 2 - Plan 1 and Plan 2

\$.40 per Insured Person per annum, excluding chaperones
Chaperones - \$100.00 per annum

Option 3 - Plan 1 plus Freedom Multi Trip Annual Travel Insurance

\$1.91 per Insured Person per annum, excluding chaperones (Plan 1 - \$.20 per Insured Person per annum and Freedom Multi Trip Annual Travel Insurance - \$1.71 per Insured Person per annum)
Chaperones - No charge

“Freedom Multi Trip Annual Travel Insurance” is provided under Master Group Policy No. IAP001, or its replacement, underwritten by Travel Underwriters.

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

Attached to and forming part of Policy No. 100006766 of INDUSTRIAL ALLIANCE PACIFIC INSURANCE AND FINANCIAL SERVICES INC. issued to URBAN SCHOOL INSURANCE CONSORTIUM

Registrar

It is understood and agreed between the Policyholder and the Company that the definition of “**Member of the Immediate Family**” specified under **DEFINITIONS** of this policy is amended to read as follows effective April 1, 2010:

“**Member of the Immediate Family**” whenever used in this policy means a person who is the son, daughter, father, mother, brother, sister, son-in-law, daughter-in-law, father-in-law, mother-in-law, brother-in-law, sister-in-law (all of the above include natural, adopted or step relationships), spouse, aunt, uncle, first cousin, grandson, granddaughter, grandfather or grandmother of the Insured Person.

It is further understood and agreed that **TRIP CANCELLATION** specified under **PLAN 2** of this policy is amended to read as follows effective September 1, 2010:

TRIP CANCELLATION

In the event that the Insured Person is unable to undertake or continue the scheduled trip as a result of a teacher strike, Canadian government travel advisory or International SOS security alert, or the Injury, Sickness or death of the Insured Person or a Member of the Immediate Family, the Company will reimburse the Insured Person the non-refundable, pre-paid travel arrangements which are non-refundable on the day when the covered reason for cancellation occurs.

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

Attached to and forming part of Policy No. 100006766 of INDUSTRIAL ALLIANCE PACIFIC INSURANCE AND FINANCIAL SERVICES INC. issued to URBAN SCHOOL INSURANCE CONSORTIUM

 _____ Registrar

It is understood and agreed between the Policyholder and the Company that the definitions of “**Member of the Immediate Family**” and “**Sickness**” specified under **DEFINITIONS** of this policy are amended to read as follows effective December 1, 2009:

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

“**Sickness**” whenever used in this policy means sickness, disease or Chronic Condition occurring while this policy is in force as to the Insured Person whose sickness is the basis of claim.

It is further understood and agreed that **DEFINITIONS** of this policy is amended to include the following effective December 1, 2009:

“**Chronic Condition**” whenever used in this policy means a disease or disorder which has existed for a minimum of six months. Only one, the first, occurrence per Insured Person per insured trip is eligible as the basis of claim.

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

Attached to and forming part of Policy No. 100006766 of INDUSTRIAL ALLIANCE PACIFIC INSURANCE AND FINANCIAL SERVICES INC. issued to URBAN SCHOOL INSURANCE CONSORTIUM

Registrar

It is understood and agreed between the Policyholder and the Company that the definition of “**Student**” specified under **DEFINITIONS** of this policy is amended to read as follows effective September 1, 2009:

“**Student**” whenever used in this policy means a resident of Canada over six months of age, who is presently enrolled with and attending regularly any Canadian licensed or registered Day Care, preschool, playschool, kindergarten, elementary or secondary school of a participating school board of the Policyholder, who is not a foreign exchange student or an international student and who has not taken or arranged to take full-time permanent employment.

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

Attached to and forming part of Policy No. 100006766 of INDUSTRIAL ALLIANCE PACIFIC INSURANCE AND FINANCIAL SERVICES INC. issued to URBAN SCHOOL INSURANCE CONSORTIUM

 _____ Registrar

It is understood and agreed between the Policyholder and the Company that Section 4 of this policy is amended to read as follows effective September 1, 2008:

Section 4 - Description of Hazards - The hazards against which insurance is provided under and subject to the provisions of this policy for each classification of Insured Persons are defined as follows:

Class 1

Plan 1 of this policy shall take effect with respect to an Insured Person when the Insured Person leaves his Residence to undertake an insured trip approved by the Policyholder and shall continue until he returns to his Residence upon completion of the trip.

Plan 2 of this policy shall take effect with respect to an Insured Person on the date of the master application provided no trip cancellation penalties have become chargeable.

Coverage shall be restricted to the Option specified on the participating school board's USIC Blanket Student Travel Enrollment Requisition/ Invoice form on file with the Company.

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

Attached to and forming part of Policy No. 100006766 of INDUSTRIAL ALLIANCE PACIFIC INSURANCE AND FINANCIAL SERVICES INC. issued to URBAN SCHOOL INSURANCE CONSORTIUM

Registrar

BLANKET STUDENT TRAVEL

Industrial Alliance Pacific Insurance and Financial Services Inc.

(hereinafter called the Company)

Issued to: URBAN SCHOOL INSURANCE CONSORTIUM

(hereinafter called the Policyholder)

Policy Number: 100006766

Effective Date: September 1, 2008

Expiry Date: September 1, 2009

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

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

This policy will be automatically renewed for further consecutive terms upon payment of the premium at the rate and in the amount determined by the Company at the time of renewal, subject to the part titled "Termination of Policy".

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

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



CHIEF EXECUTIVE OFFICER



PRESIDENT AND CHIEF OPERATING OFFICER

COUNTERSIGNED

REGISTRAR

DEFINITIONS

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

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

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

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

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

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

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

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

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

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

Attached to and forming part of Policy Number 100006766

DEFINITIONS (Continued...)

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

“**Sickness**” whenever used in this policy means sickness or disease occurring while this policy is in force as to the Insured Person whose sickness is the basis of claim.

“**Student**” whenever used in this policy means a permanent resident of Canada over six months of age, who is presently enrolled with and attending regularly any Canadian licensed or registered Day Care, preschool, playschool, kindergarten, elementary or secondary school of a participating school board of the Policyholder, and who has not taken or arranged to take full-time permanent employment.

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

PLAN 1

ACCIDENTAL DEATH, DISMEMBERMENT AND SPECIFIC LOSS INDEMNITY

Principal Sum - \$25,000.00

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

Life	The Principal Sum
Both Hands	The Principal Sum
Both Feet.....	The Principal Sum
Entire Sight of Both Eyes	The Principal Sum
One Hand and One Foot	The Principal Sum
One Hand and the Entire Sight of One Eye	The Principal Sum
One Foot and the Entire Sight of One Eye	The Principal Sum
Speech and Hearing in Both Ears.....	The Principal Sum
One Arm	Three-Quarters of the Principal Sum
One Leg	Three-Quarters of the Principal Sum
One Hand.....	Two-Thirds of the Principal Sum
One Foot	Two-Thirds of the Principal Sum
Entire Sight of One Eye.....	Two-Thirds of the Principal Sum
Speech or Hearing in Both Ears.....	Two-Thirds of the Principal Sum
Thumb and Index Finger of Either Hand.....	One-Third of the Principal Sum
Four Fingers of Either Hand	One-Third of the Principal Sum
Hearing in One Ear.....	One-Third of the Principal Sum
All Toes of One Foot.....	One-Quarter of the Principal Sum

PARALYSIS BENEFITS

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

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

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

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

PLAN 1 (Continued...)

ARTIFICIAL LIMBS, EYES AND OTHER PROSTHETIC APPLIANCES BENEFIT

When Injury results in these appliances being prescribed by a Physician and purchased within one year from the date of the accident, the Company will pay the cost up to a maximum of \$2,000.00 as the result of any one accident.

DOUBLE INDEMNITY

If Injury to an Insured Person is sustained while riding as a passenger in or on, including boarding or alighting from or being struck by any public conveyance licensed for the carriage of passengers for hire and results in a Loss payable under the part titled "Accidental Death, Dismemberment and Specific Loss Indemnity" of this policy, the Principal Sum payable will be doubled to \$50,000.00.

HOSPITAL AND MEDICAL EXPENSES

If Injury or Sickness of an Insured Person requires:

- (a) treatment at a Hospital;
- (b) blood plasma, whole blood or oxygen, including administration thereof;
- (c) emergency treatment by a legally qualified Physician or surgeon;
- (d) medical care and treatment rendered or surgical procedure performed by a Physician, subject to the health insurance plan schedule of fees published by the province or territory of the Insured Person's Residence;
- (e) x-rays and laboratory examinations which are required for diagnostic purposes;
- (f) the service of a licensed ambulance from the scene of the accident or place of onset of the Sickness to the nearest Hospital;
- (g) drugs or medicines prescribed by the attending Physician (oral contraceptives and patent medicines excluded);
- (h) employment of a Nurse or certified nursing aid when recommended by the attending Physician;
- (i) treatment by a licensed chiropractor, osteopath, chiropodist or podiatrist;
- (j) the service of a licensed anaesthetist when recommended by the attending Physician, subject to the health insurance plan schedule of fees published by the province or territory of the Insured Person's Residence;
- (k) rental of crutches and appliances, or hospital-type bed;
- (l) rental of a wheelchair, iron lung and other durable equipment for therapeutic treatment, not to exceed the purchase price prevailing at the time rental became necessary;
- (m) splints, trusses and braces; or

PLAN 1 (Continued...)

HOSPITAL AND MEDICAL EXPENSES (Continued...)

(n) physiotherapy when recommended by the attending Physician,

the Company will pay the reasonable and customary expense incurred within three years from the date of the accident or onset of the Sickness for such treatment or services. Benefits payable hereunder shall be reduced by any benefits paid or payable under any government sponsored hospital or medical plans or any other student insurance plan underwritten by the Company. Benefits payable hereunder which are also paid or payable under any other insurance program shall be reduced to the extent that in no event will payment from all sources exceed 100% of the actual expenses incurred for such treatment or service.

The lifetime maximum amount payable by the Company under this part with respect to an Insured Person is \$1,000,000.00.

REPATRIATION, BOARD, LODGING AND ADDITIONAL TRAVEL EXPENSES

In the event of: (a) the death of the Insured Person, (b) the Injury or Sickness of the Insured Person and certified as medically necessary by the attending Physician, (c) the death of a Member of the Immediate Family, (d) the Injury or Sickness of a Member of the Immediate Family certified by the attending Physician to be of a severity requiring the attendance of the Insured Person, the Insured Person requires transportation to his place of Residence, the Company will pay the necessary actual expense incurred for such transportation, less any refund due as the result of cancellation or rescheduling of transportation previously arranged.

In the event of (a) the death of the Insured Person or (b) the Injury or Sickness of the Insured Person certified by the attending Physician to be of a severity requiring the attendance of a medical attendant, chaperone or Member of the Immediate Family, the Company will pay the reasonable board, lodging and additional travel expenses incurred by such medical attendant, chaperone or Member of the Immediate Family to remain with the Insured Person or accompany the Insured Person on return to his place of Residence. Board and lodging expenses are restricted to a maximum of \$100.00 per day and for a maximum period of 30 consecutive days. All benefits payable for such board, lodging and additional travel expenses are limited to an aggregate of \$5,000.00 as the result of any one Injury, Sickness or death. Additional travel expenses are restricted to the round-trip economy airfare for a Member of the Immediate Family or medical attendant (not accompanying the Insured Person prior to such Injury, Sickness or death) and the one-way economy airfare for a chaperone.

In the event Injury, Sickness or quarantine of the Insured Person after departure temporarily prevents the Insured Person from continuing the trip, the Company will pay the reasonable cost of transportation by the most direct route to allow the Insured Person to rejoin the original tour or group.

The total of all benefits payable under this part shall not exceed an aggregate amount of \$10,000.00 as the result of any one Injury, Sickness or death.

PLAN 2

TRIP CANCELLATION

In the event that the Insured Person is unable to undertake or continue the scheduled trip as a result of Injury, Sickness or death of the Insured Person or a Member of the Immediate Family, the Company will reimburse the Insured Person the non-refundable, pre-paid travel arrangements which are non-refundable on the day when the covered reason for cancellation occurs.

AGGREGATE LIMIT OF INDEMNITY

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

EXCLUSIONS

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

- (a) declared or undeclared war or any act thereof;
- (b) pregnancy or childbirth;
- (c) air travel except as a fare paying passenger in a scheduled aircraft;
- (d) suicide or any attempt thereat or intentionally self-inflicted injury, while sane or insane;
- (e) participating in terrorist activities of any kind;
- (f) any loss as the sole result of the utilization of nuclear, chemical or biological weapons of mass destruction howsoever these may be distributed or combined;
- (g) any ailment or condition for which an Insured Person undertakes a journey for the purpose of securing or with the intent of receiving medical attention, prescription drugs or medicine, or Hospital services.

TERMINATION OF POLICY

This policy may be terminated by the Company or by the Policyholder by one giving to the other 30 days notice in writing of such intention to terminate, delivered personally or sent by registered mail to the latest address of the Company or the Policyholder, as the case may be and thereupon, the policy will cease on the expiration of such 30 days. This policy may be terminated by the Company forthwith provided such cancellation is given in writing, delivered personally or sent by registered mail to the latest address of the Policyholder in the event of failure by the Policyholder to remit premiums to the Company as and when due.

Attached to and forming part of Policy Number 100006766

TERMINATION OF INSURANCE OF AN INSURED PERSON

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

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

INADVERTENT ERROR

The insurance of an Insured Person will not be prejudiced by the failure on the part of the Policyholder to transmit reports or comply with any of the provisions of this policy when such failure is due to inadvertent error or clerical mistake.

GENERAL PROVISIONS

THE CONTRACT

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

PRIVACY

The Policyholder agrees to follow the Privacy Procedures attached as Appendix 1 in order to comply with Privacy Legislation relating to the collection, retention, use and disclosure of personal information.

WAIVER

The Company will be deemed not to have waived any conditions of this contract, either in whole or in part, unless the waiver is clearly expressed in writing and signed by a duly authorized officer of the Company.

NOTICE AND PROOF OF CLAIM

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

- (a) give written notice of claim to the Company:
 - (i) by delivery thereof, or by sending it by registered mail to the Head Office or chief agency of the Company in the province, or
 - (ii) by delivery thereof to an authorized agent of the Company in the province,

Attached to and forming part of Policy Number 100006766

GENERAL PROVISIONS (Continued...)

NOTICE AND PROOF OF CLAIM (Continued...)

(a) Continued...

not later than 30 days from the date of the accident;

(b) within 90 days from the date of the accident for which the claim is made, furnish to the Company such proof of claim as is reasonably possible in the circumstances of the happening of the accident, and the loss occasioned thereby; and

(c) if so required by the Company, furnish a satisfactory certificate as to the cause or nature of the accident for which the claim may be made under the contract.

FAILURE TO GIVE NOTICE OR PROOF

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

CLAIM FORMS

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

TIME OF PAYMENT OF CLAIMS

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

PAYMENT OF CLAIMS

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

PHYSICAL EXAMINATION AND AUTOPSY

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

Attached to and forming part of Policy Number 100006766

GENERAL PROVISIONS (Continued...)

INSPECTION OF RECORDS

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

LEGAL ACTION

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

APPENDIX 1

PRIVACY POLICY

Given the nature of its business, Industrial Alliance Pacific Insurance and Financial Services Inc. (IAP) necessarily collects sensitive personal information such as health, lifestyle and financial information concerning (a) individual and group policyholders, lives insured and beneficiaries, (b) employees and (c) brokers, agents and other individuals with whom IAP does business. IAP has a legal obligation to maintain such information in an accurate and strictly confidential manner, retained by it only to the extent necessary for only as long as necessary.

This policy explains how IAP meets this obligation. IAP's success depends on maintaining the trust of people who provide personal information to the company.

"Personal information" is defined by the law to mean information concerning an identifiable individual. It does not include the name, title or business address, telephone number or e-mail address of an employee at work. Personal information is contained in many forms, such as correspondence, memoranda, electronic communications, video or audio recordings, photographs or any other documentary material.

ACCOUNTABILITY

IAP is legally responsible for personal information in its possession or control, including information that is transferred by IAP to be processed by a third party service provider (i.e., a supplier of off-site storage services).

IAP does not sell client lists under any circumstances.

IAP adheres to rules, legislated and self-imposed, to safeguard privacy. The rules are established by this Privacy Policy, the Code of Business Conduct (applying to directors, officers and employees), the Market Conduct Standards (applying to agents and brokers) as well as insurance industry guidelines and applicable law. Each of IAP's business divisions must develop and maintain procedures which implement these rules. When a third party service provider agrees to do business with IAP, such provider must contractually agree to comply with this policy and where appropriate, additional guidelines specific to the type of service being provided.

Staff must be trained and provided with information about the privacy laws which affect IAP and about IAP's policies and procedures.

PURPOSE OF INFORMATION

The purpose for which personal information about an individual is to be collected, used and disclosed by IAP must be identified to the individual at or before the time the information is collected. For its policyholders, IAP will generally do this through its application or claim forms. For its employees, agents and brokers, this will be accomplished through the relevant application forms. When an individual chooses to do business with IAP or be employed by IAP, IAP will ask only for information necessary to establish and maintain the specific business relationship. Sometimes, this means that IAP must ask for information required to satisfy legal requirements imposed on IAP (i.e., a social insurance number where employment income or alternatively, investment income is earned). IAP staff will be trained to explain why the information is needed if not self evident when personal information is requested.

APPENDIX 1 (Continued...)

CONSENT TO COLLECTION, USE AND DISCLOSURE

IAP will seek consent at the same time (or before) IAP collects, uses or discloses any personal information. Usually, IAP will ask for express consent in written form (i.e., in an application for agency status, employment or insurance product). For sensitive personal information such as medical history, IAP will always seek written consent. Where information is less sensitive, IAP may seek only verbal consent. Occasionally, IAP may imply consent where IAP can reasonably infer consent from action or inaction. IAP records any decision of an individual not to grant such consent. Consent can be given by an authorized representative (such as a legal guardian or a person having power of attorney), although the authority of such a representative may be restricted by law or company policy.

Generally, an individual can choose at any time during the relationship with IAP to withdraw consent, subject to reasonable notice as well as legal and contractual restrictions which may apply. IAP staff will explain the implications of such withdrawal, which in the case of a policyholder may include termination of a policy or the inability to process a claim.

If after obtaining an individual's initial consent, IAP wishes to *change* the purpose for which information is to be used, IAP will first obtain further consent. If consent is not granted, IAP will not use the information for the new purpose and will record the decision in its files.

Most personal information will be directly provided by the individual. This is not always the case however. For example, sometimes IAP will ask for consent to make enquiries of references or to permit a family doctor to provide information relating to medical history.

USE AND DISCLOSURE OF PERSONAL INFORMATION

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

Unless prohibited by law, the individual has the right to know on request to whom IAP has disclosed the information. Only in the rare instance is IAP prevented by law from making such disclosure. IAP maintains accurate records documenting to whom IAP discloses personal information.

SAFEGUARDS

Personal information will be protected by security safeguards appropriate to the sensitivity of the information. As IAP will deal with highly sensitive information concerning health, finances and work history, this is of paramount importance to IAP. IAP's safeguards protect personal information against loss or theft, as well as unauthorized access, disclosure, copying, use, or modification. The methods of protection include:

- organizational measures (i.e., impressing upon each employee the position of trust that IAP holds, security clearances and limiting access on a "need-to-know" basis);
- physical measures (i.e., building access cards for employees, visitor registration and identification cards, off-site backups and archiving); and

APPENDIX 1 (Continued...)

CONSENT TO COLLECTION, USE AND DISCLOSURE (Continued...)

SAFEGUARDS (Continued...)

- technological measures (i.e., the use of routinely changing passwords, firewalls and segmented operator access).

DURATION OF RETENTION OF PERSONAL INFORMATION

Generally, personal information will be retained only as long as it is needed for the purpose for which it was obtained. It will then be destroyed in compliance with IAP's records retention policy. IAP must keep the information long enough to comply with insurance law, taxation law and the statute of limitations respecting the periods within which claims can be made. IAP is also required to keep personal information for the duration of any investigation respecting a concern about privacy that has been expressed.

RIGHT OF ACCESS TO PERSONAL INFORMATION

An individual has a right of full access to the existence, use and disclosure by IAP of such individual's personal information contained in IAP's records, provided there is no legal or ethical reason not to do so. Exceptions to the right of access are limited and specific; unless prevented by law; reasons for denying access are given to the individual upon request. Exceptions can include information that is prohibitively costly to provide, information that contains references to other individuals, information that cannot be disclosed for legal, security or commercial proprietary reasons, information that has been obtained in the course of an investigation of a potential breach of contract or fraud, and information that is subject to solicitor-client or litigation privilege. Additionally, IAP may choose to disclose certain medical information only through the designated family doctor.

ACCURACY OF PERSONAL INFORMATION

IAP will make best efforts to ensure that personal information about an individual is maintained by IAP in as accurate, complete and current manner as is necessary for the identified purpose for which such information is used. If an individual disagrees with IAP about a change, IAP records the individual's position in its records.

WHO CAN ANSWER YOUR QUESTIONS ON PRIVACY

At the outset or from time to time, an individual may have questions or concerns relating to personal information he or she has provided to IAP. The individual is encouraged to voice them as early as possible. IAP is committed to safeguarding individuals' privacy and IAP wants people to feel confident in entrusting personal information to IAP.

If an individual has a concern or query about privacy, the person with whom he or she is directly dealing may be able to satisfy such concern. IAP's customer representatives will be trained to assist in this regard. Such representative may refer the individual to the manager of the relevant department or alternatively, IAP's Privacy Officer.

The Privacy Officer is the person with overall accountability for maintaining the privacy of personal information within IAP.

SCHEDULE

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

**Classification
of
Insured Persons**

Name or Category of Insured Persons

Class 1	Students and chaperones under age 70 of a participating school board of the Policyholder as indicated on the school board's current USIC Blanket Student Travel Enrollment Requisition/Invoice form on file with the Company and from whom the appropriate premium has been received, excluding foreign exchange Students and international Students.
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Section 2 - Aggregate Limit of Indemnity - Unlimited per any one accident.

Section 3 - Premium - The premium for the initial term of this policy is subject to a minimum retained policy premium of \$500.00 per participating school board and calculated as follows:

Chaperones - \$100.00 per annum

Option 1 - Plan 1

\$.20 per Insured Person per annum, excluding chaperones

Option 2 - Plan 1 and Plan 2

\$.40 per Insured Person per annum, excluding chaperones

Section 4 - Description of Hazards - The hazards against which insurance is provided under and subject to the provisions of this policy for each classification of Insured Persons are defined as follows:

Class 1	Plan 1 of this policy shall take effect with respect to an Insured Person when the Insured Person leaves his Residence to undertake an insured trip approved by the Policyholder and shall continue until he returns to his Residence upon completion of the trip.
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Plan 2 of this policy shall take effect with respect to an Insured Person on the date of application provided no cancellation penalties have become chargeable.

Coverage shall be restricted to the Option specified on the participating school board's USIC Blanket Student Travel Enrollment Requisition/ Invoice form on file with the Company.

SCHEDULE (Continued...)

Section 5 - Beneficiary - Benefits payable in the event of the loss of life of an Insured Person are payable to the parent or guardian where a minor, otherwise to the estate of the Insured Person. All other indemnities payable are payable to the parent or guardian where a minor, otherwise to the Insured Person.