**众惠财产相互保险社**

**旅行意外伤害保险（互联网专属）**

**Public Mutual Insurance Corporation（PMIC)**

**Travel accident insurance (exclusive to the Internet)**

**第一章 基本条款**

**第一条 保险合同的构成**

本保险条款、保险单、投保单、附加条款、批注及其他约定书均为《众惠财产相互保险社旅行意外伤害保险》（以下简称本合同）的构成部分。

Chapter I Basic Terms

Article 1 Composition of insurance contract

This insurance clause, insurance policy, application form, additional clauses, comments and other agreements are all part of the "Travel Accident Insurance of PMIC Property Mutual Insurance Company" (hereinafter referred to as the Contract).

**第二条 保险人**

本合同的保险人为众惠财产相互保险社（以下简称“本社”或“保险人”）。

Article 2 The insurer

The insurer of this contract is PMIC Property Mutual Insurance Company (hereinafter referred to as "the Company" or "the insurer").

**第三条 投保人**

本合同的投保人应为具有完全民事行为能力的被保险人本人、对被保险人有保险利益的其他人、法人或非法人组织。

Article 3 Applicant

The applicant of this contract shall be the insured with full civil capacity, other persons, legal persons or unincorporated organizations with insurable interests in the insured.

**第四条 被保险人**

本合同投保时的被保险人可以为一人或数人，但最多不超过法律规定的人数限制，以本合同约定的为准。被保险人的投保年龄必须符合本合同约定的年龄要求。**任何情形下，本保险不承保任何国家或国际组织认定的恐怖分子或恐怖组织成员，或非法从事毒品、核武器、生物或化学武器交易人员**。

**若任何被保险人为同一旅行自愿投保由本社承保的多种保障产品（不包括团体保险），且在不同保障产品中有相同保险利益的，则本社仅按其中保险金额最高者做出赔偿，并退还其它保险项下已收取的相应保险利益的保险费。**

若本合同项下的被保险人按本合同其他条款的约定而发生减少，则应以该条款约定为准，本社将书面通知投保人。

Article 4 The Insured

The insured at the time of application under this contract may be one or more persons, but the maximum number of persons shall not exceed the number limit prescribed by law, which shall be subject to the provisions of this contract. The insured's insurance age must meet the age requirements agreed in this contract. In any case, this insurance does not cover terrorists or members of terrorist organizations recognized by any country or international organization, or persons who are illegally engaged in drug, nuclear weapons, biological or chemical weapons transactions.

If any insured voluntarily insures multiple insurance products (excluding group insurance) underwritten by our company for the same travel, and has the same insurance interest in different insurance products, our company will only make compensation according to the highest insurance amount, and return the premium of corresponding insurance interest collected under other insurance items.

If the insured under this contract is reduced according to other provisions of this contract, the provisions of this clause shall prevail, and PMIC will notify the applicant in writing.

**第五条 被保险人的减少**

本社将按以下约定减少本合同项下的被保险人：

（1）**在本合同有效期内，投保人申请减少某被保险人，则自其被****取消被保资格之时起，本合同项下的被保险人将不再包含该被保险人，****其被保资格将于当日二十四时丧失。**但对于投保单次旅行的情形，如投保人按前述约定申请减少某被保险人的，应经本社同意，如属境外旅行的，还应提供该被保险人自申请之时起未出境的证明。除本合同另有约定外，本社将退还按日计算的该被保险人项下相应的未满期净保险费。

（2）**若被保险人身故或本合同项下对被保险人的累计给付金额达到保险单所载该被保险人所对应的保险金额，则自其身故之日起或于本合同项下对其累计给付金额达到其保险金额之日起，本社对该被保险人的保险责任终止，本合同项下的被保险人将不再包含该被保险人。**

**Article 5 Reduction of the insured**

**PMIC will reduce the insured under this contract according to the following agreement:**

**(1) During the validity period of this contract, if the applicant applies to reduce an insured, the insured under this contract will no longer include the insured from the time of its cancellation of the insured qualification, and its insured qualification will be lost at 24:00 on the same day. However, in the case of a single trip of the insurance policy, if the applicant applies to reduce an insured person according to the aforementioned agreement, it shall obtain the consent of the agency. In the case of overseas travel, it shall also provide the certificate that the insured person has not left the country since the time of application. Unless otherwise agreed in this contract, PMIC will refund the corresponding unexpired net premium of the insured calculated on a daily basis.**

**(2) If the insured dies or the accumulated benefit amount to the insured under this contract reaches the insured amount corresponding to the insured specified in the insurance policy, the insurance liability of PMIC to the insured shall terminate from the date of death or the date of the accumulated benefit amount to the insured under this contract, and the insured under this contract will no longer include the insured.**

**第六条 年龄的确定与错误的处理**

被保险人的投保年龄，以法定身份证件登记的周岁年龄为准, 本合同所承保的被保险人的投保年龄必须符合本合同约定的年龄要求。投保人在申请投保时，应按被保险人的周岁年龄填写。若申报的被保险人的年龄不真实，则按照以下规定处理：

**（1）投保人申报的被保险人年龄不真实，导致投保人实付保险费少于应付保险费的，保险人有权更正并要求投保人补交保险费，或在给付保险金时按照实付保险费与应付保险费的比例支付。**

（2）若按被保险人的周岁年龄所需收取的保险费较低，则所有多缴保险费将无息退还，而所购买的保险金额维持不变。

**（3）投保人申报的被保险人年龄不真实，且真实年龄不符合本保险合同约定的年龄限制的，保险人有权终止对该被保险人的保险责任，并向投保人退还保险责任终止时该被保险人对应的本保险合同的未满期净保险费。**

**Article 6 Determination of age and handling of errors**

**The insurance age of the insured shall be subject to the full age registered in the legal identity certificate. The insurance age of the insured covered by this contract must meet the age requirements agreed in this contract. When applying for insurance, the applicant shall fill in according to the age of the insured. If the declared age of the insured is not true, it shall be handled according to the following provisions:**

**(1) If the age of the insured declared by the applicant is untrue, resulting in the actual payment of the premium less than the payable premium, the insurer has the right to correct and require the applicant to pay the premium, or pay the premium according to the proportion of the actual payment and the payable premium when paying the insurance benefits.**

**(2) If the premium charged according to the age of the insured is low, all overpaid premiums will be refunded without interest, while the amount of insurance purchased will remain unchanged.**

**(3) If the age of the insured declared by the applicant is not true and the true age does not meet the age limit agreed in the insurance contract, the insurer has the right to terminate the insurance liability for the insured and return the unexpired net premium of the insurance contract corresponding to the insured at the time of termination of the insurance liability to the applicant.**

**第七条 受益人的指定与变更**

于订立本合同时投保人经被保险人同意，可指定一人或数人为身故保险金受益人。身故保险金受益人为数人时，投保人可以确定受益顺序和受益份额，若未确定受益份额，各身故保险金受益人将享有相等的受益权。受益人故意造成被保险人死亡、伤残、疾病的，或者故意杀害被保险人未遂的，该受益人丧失受益权。

投保人经被保险人同意，可以书面通知本社变更身故保险金受益人，并由本社记录及在保险合同上批注后生效。因身故保险金受益人变更所引起的法律上的纠纷，本社不负任何责任。

被保险人身故，本社将应付的保险金给予健在的身故保险金受益人。除另有特别安排外，若所有身故保险金受益人先于被保险人身故，则本合同应付的保险金将归于被保险人的遗产。

Article 7 Designation and change of beneficiary

At the time of conclusion of this contract, the applicant may, with the consent of the insured, designate one or more persons as the beneficiary of death insurance benefits. When there are several beneficiaries of death insurance benefits, the applicant can determine the order and share of benefits. If the share of benefits is not determined, each beneficiary of death insurance benefits will have the same beneficial right. If the beneficiary intentionally causes the death, disability or disease of the insured, or intentionally kills the insured with an attempt, the beneficiary loses the right to benefit.

With the consent of the insured, the applicant may notify PMIC in writing to change the beneficiary of the death insurance benefits, which shall take effect after PMIC records and comments on the insurance contract. The Company shall not be responsible for any legal disputes arising from the change of the beneficiary of death insurance benefits.

In case of the death of the insured, the Company will give the insurance benefits payable to the surviving beneficiary of the death insurance benefits. Unless otherwise specially arranged, if all the beneficiaries of death insurance benefits die before the insured, the insurance benefits payable under this contract will belong to the insured's heritage.

**第八条 住所或通讯地址的变更**

投保人的住所或通讯地址有变更时，应及时书面通知本社。投保人不作上述通知时，本社按本合同所载的最后住所或通讯地址所发送的通知，均视为已送达投保人。

Article 8 Change of domicile or mailing address

In case of any change in the residence or mailing address of the applicant, the applicant shall promptly notify PMIC in writing. If the applicant does not make the above notice, the notice sent by PMIC according to the last residence or mailing address specified in this contract shall be deemed to have been delivered to the applicant.

**第九条 合同内容变更**

投保人在本合同有效期内，可根据本合同规定申请变更合同内容，经本社同意并记录及在保险合同上批注后生效。

**若某被保险人身故，则本社不接受本合同中有关该被保险人的任何内容的变更申请。**

**Article 9 Change of contract content**

**During the term of validity of this contract, the applicant may apply for changing the contract content according to the provisions of this contract, which will take effect after being approved by PMIC, recorded and annotated on the insurance contract.**

**In case of the death of an insured, PMIC will not accept the application for change of any content of this contract relating to the insured.**

**第二章 保险期间**

**第十条 保险责任期间**

**本社在本合同项下承担任何保险责任须以投保人一次性缴付本合同的全部保险费或按双方约定的其他方式缴付保险费且本社同意承保为前提。**本社应签发保险单作为承保的凭证。

本合同保险期间由保险人和投保人协商确定，以保险单载明的起讫时间为准。

**如投保单次旅行，本社对各被保险人的保险责任的开始时间以下列情况中最迟发生的时间为准：（1）保险单所载保险期间生效日；（2）该被保险人在本合同有效期内为该次旅行离开其境内日常居住地或日常工作地所在的市级行政区域，或搭乘公共交通工具直接前往其日常居住地或日常工作地所在的市级行政区域之外的旅行目的地（二者以早者为准）。该保险责任的终止时间以下列情况中最先发生的时间为准：（1）保险单所载保险期间满期日；（2）该被保险人完成该次旅行后直接返回至其境内日常居住地或日常工作地；（3）本合同约定的该次旅行最长承保期间届满日（该次旅行最长承保期间应自前述该次旅行出发时间起算，含始日与终日）。**

**如保险期间为一年，本社对各被保险人的保险责任的开始时间以下列情况中最迟发生的时间为准:（1）保险单所载保险期间生效日；（2）在本合同有效期内，任何被保险人每次离开其境内日常居住地或日常工作地所在的市级行政区域，或搭乘公共交通工具直接前往其日常居住地或日常工作地所在的市级行政区域之外的旅行目的地（二者以早者为准）。该保险责任的终止时间以下列情况中最先发生的时间为准：（1）该被保险人完成该次旅行后直接返回至其境内日常居住地或日常工作地；（2）本合同约定的每次旅行最长承保期间届满日（每次旅行最长承保期间应自前述该次旅行出发时间起算，含始日与终日）；（3）保险单所载保险期间满期日。**

**Chapter II Insurance Period**

**Article 10 Period of insurance liability**

**Any insurance liability assumed by PMIC under this contract shall be subject to the insured paying all the insurance premiums under this contract at one time or in other ways agreed by both parties, and PMIC agrees to underwrite. The PMIC shall issue an insurance policy as a proof of underwriting.**

**The insurance period of this contract shall be determined by the insurer and the applicant through negotiation, and shall be subject to the starting and ending time specified in the insurance policy.**

**In the event of a single trip under the insurance policy, the start time of the insurance liability of the agency to each insured shall be subject to the latest of the following circumstances: (1) the effective date of the insurance period specified in the insurance policy; (2) During the validity period of this contract, the insured leaves the municipal administrative area where his daily residence or daily work is located in China for this trip, or takes public transport to travel directly to a destination outside the municipal administrative area where his daily residence or daily work is located (whichever is earlier). The termination time of the insurance liability shall be subject to the first of the following circumstances: (1) the expiry date of the insurance period specified in the insurance policy; (2) The insured directly returns to his daily residence or work place in China after completing the trip; (3) The expiration date of the maximum insurance period of this trip agreed in this contract (the maximum insurance period of this trip shall be calculated from the departure time of the aforementioned trip, including the start date and the end date).**

**If the insurance period is one year, the start time of the insurance liability of PMIC to each insured shall be subject to the latest of the following circumstances: (1) the effective date of the insurance period specified in the insurance policy; (2) During the period of validity of this contract, any insured person shall leave the municipal administrative area where his daily residence or daily work is located in the territory of China each time, or take public transport to travel directly to the destination outside the municipal administrative area where his daily residence or daily work is located (whichever is earlier). The termination time of the insurance liability shall be subject to the first of the following circumstances: (1) The insured directly returns to his daily residence or work place in China after completing the trip; (2) The expiration date of the maximum insurance period for each trip agreed in this contract (the maximum insurance period for each trip shall be calculated from the departure time of the aforementioned trip, including the start date and the end date); (3) The expiry date of the insurance period specified in the insurance policy.**

**第十一条 保险期间的延长**

如任何被保险人于本合同有效期内因不可抗力的原因（包括但不限于恶劣的天气情况、自然灾害、因罹患疾病或遭受意外事故而致严重身体伤害入住当地医院）导致其旅程延长, 而本合同的保险期间已届满并逾期，本社将按合理情况及需要为该被保险人就该次旅程免费自动延长本合同的保险期间，最长可至该被保险人该次旅程结束。

**Article 11 Extension of insurance period**

**If any insured person's journey is extended due to force majeure (including but not limited to severe weather conditions, natural disasters, serious bodily injury caused by illness or accident) during the validity period of this contract, and the insurance period of this contract has expired and expired, PMIC will automatically extend the insurance period of this contract for the insured person free of charge according to reasonable circumstances and needs, Up to the end of the insured's trip.**

**第三章 保险金额**

**第十二条 保险金额**

本合同所称的保险金额是指保险单上所载与相关保险责任相对应的保险金额，若该金额经本合同其他条款或批注修正而发生变更，则以变更后的金额为准。

Article 12 Insurance amount

The insurance amount referred to in this contract refers to the insurance amount corresponding to the relevant insurance liability contained in the insurance policy. If the amount is changed due to the amendment of other clauses or comments in this contract, the changed amount shall prevail.

**第四章 保险责任**

**第十三条 意外身故及伤残保险金给付**

**本社在本合同项下对任一被保险人给付的各项保险金累计金额以保险单所载该被保险人的保险金额为最高限额。**

（1）身故保险金：在保险期间内，被保险人在旅行期间遭受意外伤害事故，并自该事故发生之日起180日（含）内以此事故为直接原因导致身故的，保险人按本保险合同载明的该被保险人对应的意外身故及伤残保险金额给付意外身故保险金，同时对该被保险人的保险责任终止。

在保险期间内，被保险人因遭受意外伤害事故且自该事故发生日起下落不明，后经人民法院宣告死亡的，保险人按本保险合同载明的该被保险人对应的意外身故及伤残保险金额给付意外身故保险金。**但若被保险人被宣告死亡后生还的，保险金受领人应于知道或应当知道被保险人生还后30日内退还保险人给付的意外身故保险金。**

**被保险人身故前保险人已给付第十三条第（2）款约定的意外残疾保险金的，意外身故保险金应扣除已给付的意外残疾保险金。**

（2）意外伤残保险金：任何被保险人于本合同有效期内，在旅行期间遭遇意外事故，且自事故发生之日起一百八十天内致成《人身保险伤残评定标准及代码》（保监发[2014]6号，标准编号为JR/T 0083-2013，以下简称“评定标准”）中所列的伤残项目，本社给付意外伤残保险金予该被保险人，**该给付金额为按所致伤残根据评定标准评定的伤残程度等级相对应的给付比例乘以本合同保险单上所载该被保险人相应的意外身故及伤残保险金额计算**。

**若同一意外事故造成被保险人两处或两处以上伤残时，应首先对各处伤残程度分别进行评定，如果几处伤残等级不同，以最重的伤残等级作为最终的评定结论；如果两处或两处以上伤残等级相同，伤残等级在原评定基础上最多晋升一级，最高晋升至第一级。同一部位和性质的伤残，不应采用评定标准条文两条以上或同一条文两次以上进行评定。**

**若不同意外事故造成被保险人同一器官或同一肢体的多次伤残，而伤残所属的等级不同时，以较严重伤残等级的意外伤残保险金给付为准；若后次伤残等级较严重，则需扣除已给付的意外伤残保险金；若前次伤残等级较严重，则本社不再给付后次的意外伤残保险金。若不同意外事故造成被保险人不同器官或不同肢体的伤残，则本社将分别给付意外伤残保险金，但给付金额之总数以本合同保险单上所载该被保险人相应的意外身故及伤残保险金额为限。**

**Chapter IV Insurance Liability**

**Article 13 Payment of insurance benefits for accidental death and disability**

**The cumulative amount of various insurance benefits paid by PMIC to any insured under this contract shall be the maximum amount of the insured specified in the insurance policy.**

**(1) Death insurance benefits: During the insurance period, if the insured suffers an accidental injury during the travel and dies due to this accident within 180 days (including) from the date of the accident, the insurer shall pay the accident death insurance benefits according to the corresponding accident death and disability insurance amount of the insured specified in the insurance contract, and the insurance liability for the insured shall be terminated.**

**During the insurance period, if the insured suffers from an accidental injury and his whereabouts are unknown from the date of the accident, and is later declared dead by the people's court, the insurer shall pay the accidental death insurance benefits according to the corresponding accidental death and disability insurance amount specified in the insurance contract. However, if the insured is returned after being declared dead, the insurance benefit recipient shall return the accidental death insurance benefit paid by the insurer within 30 days after knowing or should know that the insured is returned.**

**If the insurer has paid the accidental disability insurance benefits agreed in Article 13 (2) before the death of the insured, the accidental death insurance benefits shall be deducted from the paid accidental disability insurance benefits.**

**(2) Accidental disability insurance benefits: If any insured person encounters an accident during the period of travel within the validity of this contract, and within 180 days from the date of occurrence of the accident, the insurance company will pay the accidental disability insurance benefits to the insured person for the disability items listed in the Assessment Standards and Codes for Personal Insurance Disability (BJF [2014] No. 6, Standard No. JR/T 0083-2013, hereinafter referred to as the "Assessment Standards"), The amount of the benefit is calculated by multiplying the proportion of the benefit corresponding to the degree of disability assessed according to the assessment criteria for the resulting disability by the corresponding accidental death and disability insurance amount of the insured specified in the insurance policy of this contract.**

**If the same accident causes two or more injuries to the insured, the degree of each injury shall be assessed separately. If the degree of several injuries is different, the severest injury grade shall be taken as the final assessment conclusion; If two or more disability levels are the same, the disability level can be promoted to the first level at most based on the original assessment. The disability of the same part and nature shall not be assessed by more than two articles of the assessment standard or more than two articles of the same article.**

**If different accidents cause multiple injuries to the same organ or limb of the insured, and the level of the injury is different, the payment of the accidental disability insurance benefit of the more serious disability level shall prevail; If the subsequent disability level is serious, the paid accident disability insurance benefits shall be deducted; If the previous disability level is serious, the company will not pay the next accidental disability insurance. If different accidents cause the disability of different organs or different limbs of the insured, PMIC will pay the accidental disability insurance benefits separately, but the total amount of the benefits is limited to the corresponding accidental death and disability insurance amount of the insured specified in the insurance policy of this contract.**

**第五章 责任免除**

**第十四条 责任免除**

**任何直接或间接由于下列情形引起的，与之有关的，或可归因于之的被保险人的伤害，或意外事故发生于下列期间，或出现下列任一情形时，本社不负任何赔偿责任：**

**（1）战争或战争行为（无论宣战与否）、军事行动、内战、侵略、革命、政变、叛乱、谋反或任何类似事件。**

**（2）暴乱、暴动或罢工。**

**（3）任何生物、化学、原子能武器，原子能或核能装置所造成的爆炸、灼伤或辐射。**

**（4）投保人或被保险人的故意行为；或被保险人无论当时神志是否清醒，自致伤害或自杀。**

**（5）因被保险人挑衅或故意行为而导致的打斗、被袭击或被谋杀。**

**（6）被保险人参与执行军警任务或以执法者身份执行任务。**

**（7）被保险人因从事违法犯罪的活动或因拒捕而导致的伤害；以及因遭受司法当局拘禁或被判入狱期间。**

**（8）被保险人因酗酒或受酒精、毒品、管制药物的影响而导致的意外。**

**（9）被保险人酒后驾车、无照驾驶或驾驶无有效行驶证的机动交通工具。**

**（10）被保险人因精神错乱或失常而导致的意外，包括但不限于癫狂。**

**（11）被保险人未遵医生开具的处方，私自服用、涂用或注射药物。**

**（12）被保险人罹患艾滋病（AIDS）或感染艾滋病病毒（HIV）期间（前述定义，应按世界卫生组织所订的定义为准。若在被保险人的血液样本中发现上述病毒或其抗体，则认定已受该病毒感染）。**

**（13）执行任何飞行器的领航或其它空勤任务，或者参加高空跳伞特技或跳伞运动**（不包括由有资质的商业经营者提供的在跳伞教练陪同下的双人跳伞）**、滑翔、滑翔翼运动、滑翔伞运动或其它类似空中运动。**

**（14）受保前已存在的受伤及其并发症。**

**（15）被保险人参加任何高风险活动。**

**（16）被保险人进行任何特技表演、车辆表演、驯兽或车辆竞赛。**

**（17）被保险人受雇于商业船只；于海军、空军、陆军或其他军种服军役；职业性操作或测试任何种类交通工具。**

**（18）被保险人参与下列行业有关的体力劳动，前述行业包括但不限于石油挖掘、采矿、空中摄影、处理爆炸物、森林砍伐、建筑工地现场施工，交通运输司乘、搬运、装卸，水上作业，二级或以上的高处作业（以中华人民共和国国家标准ＧＢ3608—83为准）。**

**（19）被保险人参与任何传教、人道主义工作或与之有关的旅行。**

**（20）任何直接或间接由于计划或实际前往或途经本合同约定的不承保国家或地区，或在上述国家或地区旅行期间发生的保险事故。**

**（21）投保本合同或其附加合同时被保险人已置身于境外的。**

**（22）被保险人因妊娠、流产或分娩引起的伤害；药物过敏、食物中毒、美容手术、外科整形手术或其他医疗导致的伤害。**

**（23）细菌或病毒感染**（但因意外伤害致有伤口而发生感染者除外）。

Chapter V Exemption from Liability

Article 14 Exemption from liability

The PMIC shall not be liable for any injury or accident directly or indirectly caused by, related to or attributable to the insured, or in the following period, or in any of the following circumstances:

(1) War or act of war (whether war is declared or not), military action, civil war, invasion, revolution, coup, rebellion, rebellion or any similar event.

(2) Riot, riot or strike.

(3) Explosion, burn or radiation caused by any biological, chemical, atomic energy weapon, atomic energy or nuclear energy device.

(4) The intentional act of the applicant or the insured; Or whether the insured is conscious or not at that time, causing injury or suicide.

(5) Fight, attack or murder caused by the provocation or intentional act of the insured.

(6) The insured participates in the execution of military and police tasks or performs tasks as a law enforcement officer.

(7) Injuries caused by the insured's engaging in illegal and criminal activities or resisting arrest; And during the period of detention or imprisonment by the judicial authorities.

(8) Accidents caused by the insured due to alcoholism or the influence of alcohol, drugs and controlled drugs.

(9) The insured drives under the influence of alcohol, without a license or without a valid driving license.

(10) Accidents caused by insanity or disorder of the insured, including but not limited to insanity.

(11) The insured takes, smears or injects drugs without permission without complying with the prescription issued by the doctor.

(12) During the period when the insured suffers from AIDS or AIDS virus (HIV) (the above definition shall be subject to the definition set by the World Health Organization. If the above virus or its antibody is found in the blood sample of the insured, it is deemed to have been infected by the virus).

(13) Perform pilotage or other flight missions of any aircraft, or participate in skydiving stunts or parachuting (excluding double parachuting provided by qualified commercial operators accompanied by parachuting coaches), gliding, paragliding, paragliding or other similar in-flight sports.

(14) Pre-insurance injuries and complications.

(15) The insured participates in any high-risk activities.

(16) The insured carries out any stunt show, vehicle show, animal training or vehicle competition.

(17) The insured is employed on commercial vessels; Serving in the navy, air force, army or other services; Operate or test any kind of vehicle professionally.

(18) The insured participates in physical labor related to the following industries, including but not limited to oil mining, mining, aerial photography, explosive disposal, deforestation, construction site construction, transportation, transportation, handling, loading and unloading, water operations, and work at heights of Class II or above (subject to the national standard of the People's Republic of China GB3608-83).

(19) The insured participates in any missionary, humanitarian work or travel related to it.

(20) Any insurance accident directly or indirectly caused by the planned or actual travel to or through the uninsured countries or regions agreed in this contract, or during the travel in the above-mentioned countries or regions.

(21) The insured has been abroad at the time of applying for this contract or its additional contract.

(22) Injury caused by pregnancy, abortion or childbirth of the insured; Injury caused by drug allergy, food poisoning, cosmetic surgery, plastic surgery or other medical treatment.

(23) Bacterial or viral infection (except those infected by wounds caused by accidental injury).

**第六章 保险费**

**第十五条 保险费的缴付**

如保险期间为一年，投保人可按本社核定的保险费一次性缴付，亦可选择由本社同意的分期方式缴付保险费，第一期以后的保险费应在保险费到期日或以前由投保人根据本合同约定的缴付方式自行缴付。

**在采取分期缴付保险费方式的情况下，发生索赔（包括在约定宽限期内发生索赔）时，若本社于本合同项下向某被保险人累计给付赔偿金额将达保险单所载的保险金额时，本社有权要求投保人先补缴该被保险人该保险年度未缴的保险费，然后再对该索赔进行处理。**

如保险期间不足一年，投保人应按本合同约定的缴付方式缴付保险费。

Chapter VI Insurance premium

Article 15 Payment of insurance premium

If the insurance period is one year, the applicant may pay the insurance premium at one time according to the insurance premium approved by PMIC, or pay the insurance premium in installments agreed by PMIC. The insurance premium after the first period shall be paid by the applicant according to the payment method agreed in this contract on or before the expiration date of the insurance premium.

In case of claims (including claims within the agreed grace period) in which the insurance premium is paid by installments, if the cumulative amount of compensation paid by PMIC to an insured under this contract will reach the insurance amount specified in the insurance policy, PMIC has the right to require the applicant to pay the unpaid insurance premium of the insured in the insurance year first, and then handle the claim.

If the insurance period is less than one year, the applicant shall pay the insurance premium according to the payment method agreed in this contract.

**第十六条 宽限期**

仅当保险期间为一年时，若投保人依约定分期缴付保险费，则除首期保险费外，每次缴费宽限期由投保人、保险人双方约定，并在本合同中载明。

Article 16 Grace period

Only when the insurance period is one year, if the applicant pays the insurance premium in installments according to the agreement, the grace period for each payment shall be agreed by both the applicant and the insurer, and shall be specified in this contract, except for the first insurance premium.

**第七章 合同的解除与终止**

**第十七条 告知义务及合同的效力**

投保人或被保险人对于本社询问的告知事项应据实说明。

**（1）若因故意未履行如实告知义务，足以直接影响本社决定是否同意承保本合同或提高保险费率的，无论当时保险事故是否发生，本社有权按照相关法律规定解除本合同，并不退还保险费。对于本合同解除前所发生的保险事故，本社不承担赔偿或者给付保险金的责任。若上述故意未履行如实告知义务仅直接影响本社决定是否同意承保某一被保险人，则其被保资格将被取消；对于取消其被保资格前所发生的保险事故，本社不承担任何保险责任。**

（2）**若因重大过失未履行如实告知义务，足以直接影响本社决定是否同意承保本合同或提高保险费率的，无论当时保险事故是否发生，本社有权按照相关法律规定解除本合同，**并无息退还保险费。**若上述因重大过失未履行如实告知义务仅直接影响本社决定是否同意承保某一被保险人，则其被保资格将被取消，**本社将无息退还该被保险人相应部分的保险费。**若因重大过失未履行如实告知义务，对于本合同解除前或取消被保资格前所发生的保险事故有严重影响的，本社对该保险事故不承担任何保险责任。**

（3）若未履行如实告知义务足以直接影响本社决定是否提高保险费率的，而本社同意继续承保的，投保人应向本社补缴自本合同的生效日起累计增加的保险费。

Chapter VII Cancellation and Termination of Contract

Article 17 The obligation to inform and the validity of the contract

The applicant or the insured shall truthfully explain the matters to be informed about the inquiry of the agency.

(1) If the intentional failure to perform the obligation of truthful disclosure is enough to directly affect the decision of PMIC to agree to underwrite this contract or increase the insurance rate, regardless of whether the insurance accident occurred at that time, PMIC has the right to terminate this contract in accordance with relevant laws and regulations without refunding the insurance premium. For the insurance accidents occurred before the termination of this contract, PMIC shall not be liable for compensation or payment of insurance benefits. If the above intentional failure to fulfill the obligation of truthful disclosure only directly affects the PMIC's decision on whether to agree to underwrite an insured, its insured qualification will be cancelled; For the insurance accidents that occurred before the cancellation of the insured qualification, PMIC will not bear any insurance liability.

(2) If the failure to perform the obligation of truthful disclosure due to gross negligence is sufficient to directly affect the decision of PMIC to agree to underwrite this contract or increase the insurance rate, regardless of whether the insurance accident occurred at that time, PMIC has the right to terminate this contract in accordance with relevant laws and regulations and return the insurance premium without interest. If the above failure to perform the obligation of truthful disclosure due to gross negligence only directly affects the PMIC's decision on whether to agree to underwrite an insured, its insured qualification will be cancelled, and the PMIC will refund the corresponding part of the insurance premium of the insured without interest. If the failure to perform the obligation of truthful disclosure due to gross negligence has a serious impact on the insured accident before the termination of this contract or the cancellation of the insured qualification, PMIC will not bear any insurance liability for the insured accident.

(3) If the failure to fulfill the obligation of truthful disclosure is sufficient to directly affect the decision of PMIC to increase the premium rate, and PMIC agrees to continue to underwrite, the applicant shall pay the accumulated increased premium to PMIC since the effective date of this contract.

**第十八条 合同的解除**

投保人可于本合同有效期内以书面形式向本社申请退保，本合同将于书面通知列明的合同终止日二十四时终止。但对于投保单次旅行的情形，如投保人按前述约定申请退保，应经本社同意，如属境外旅行的，还应提供所有被保险人自申请退保之时起未出境的证明。投保人按前述约定退保的，本社将退还按日计算的未满期净保险费。

Article 18 Termination of the Contract

The applicant may apply to PMIC for surrender of insurance in writing within the validity period of this contract, and this contract will be terminated at 24:00 on the contract termination date specified in the written notice. However, in the case of a single trip of the insurance policy, if the applicant applies for surrender according to the above agreement, it shall be approved by the agency. In the case of overseas travel, it shall also provide evidence that all the insured have not left the country since the time of applying for surrender. If the applicant withdraws the insurance according to the above agreement, PMIC will refund the unexpired net insurance premium calculated on a daily basis.

**第十九条 合同效力的终止**

发生下列情形时，本保险合同自动终止：

（一）保险合同期满；

（二）因本保险合同其他条款所约定的情况而终止效力。

**被保险人在其保险期间内身故，或者被保险人的保险期间届满，保险人对该被保险人的保险责任终止。**

**Article 19 Termination of the Contract**

**This insurance contract will automatically terminate in the following circumstances:**

**（1） The insurance contract expires;**

**（2） The insurance contract shall be terminated due to the circumstances agreed in other clauses of the insurance contract.**

**The insurer's insurance liability to the insured shall terminate when the insured dies within the insurance period or the insurance period of the insured expires.**

**第八章 保险金的申请**

**第二十条 保险事故的通知**

投保人、被保险人或者保险金受益人知道保险事故发生后，应当及时通知本社。

**如因索赔申请人故意或重大过失未及时通知本社，而导致保险事故的性质、原因、损失程度难以确定的，本社对无法确定的损失部分不负赔偿责任**，但本社通过其它途径已经及时知道或者应当及时知道保险事故发生的除外。

**第二十一条 证明文件/索赔申请**

若发生保险事故，索赔申请人向本社提出索赔时，应填写索赔申请书，并提供以下证明和资料原件予本社，以申请本合同项下保险金：

（1）保险合同；

（2）被保险人的户籍注销证明或其他相关类似证明、身份证件（如适用）；

（3）身故保险金受益人的户籍证明或其他相关类似证明、身份证件（如适用）；

（4）医院、公安部门或本社认可的死亡证明或其他相关类似证明（如适用）；

（5）二级或二级以上医院或本社认可的医疗机构、司法鉴定机构或其他鉴定机构出具的被保险人伤残程度鉴定书（如适用）；

（6）索赔申请人所能提供的与本项申请相关的其他材料。

若索赔申请人因特殊原因不能提供上述证明资料，则应提供法律认可的其他有关证明资料，以提出索赔申请。**索赔申请人未能提供有关材料，导致本社无法核实该申请的真实性的，本社对无法核实部分不承担给付保险金的责任。**

本社在收到索赔申请人的赔偿请求及完整的索赔资料后，将及时作出核定。情形复杂的，如无法在法律规定的时限内作出核定，则双方同意适当延长，但延长的时限最长不超过 30 天。

本社应当将核定结果通知索赔申请人；对属于保险责任的，在与索赔申请人达成给付保险金的协议后十日内，履行赔偿保险金义务。本合同对给付保险金的期限有约定的，本社应当按照约定履行给付保险金的义务。本社依照前款约定作出核定后，对不属于保险责任的，应当自作出核定之日起在法律规定的时限内向索赔申请人发出拒绝给付保险金通知书，并说明理由。

本合同项下的相关索赔申请人向本社请求赔偿或者给付保险金的诉讼时效期间以适用法律规定的为准，自其知道或者应当知道保险事故发生之日起计算。

Chapter VIII Application for Insurance Benefits

Article 20 Notification of insurance accident

The applicant, the insured or the beneficiary of the insurance benefits shall notify the PMIC in a timely manner after knowing the occurrence of the insurance accident.

If the nature, cause and degree of loss of the insured accident are difficult to be determined due to the intentional or gross negligence of the claim applicant, PMIC shall not be liable for the part of the loss that cannot be determined, unless PMIC has known or should have known the occurrence of the insured accident in time through other means.

Article 21 Supporting documents/claim application

In case of an insurance accident, the applicant for claim shall fill in the claim application form and provide the following original certificates and materials to PMIC to apply for the insurance benefits under this contract:

(1) Insurance contract;

(2) The certificate of cancellation of the insured's registered residence registration or other relevant similar certificates, identity documents (if applicable);

(3) Registered residence certificate or other relevant similar certificates and identity documents of the beneficiary of death insurance benefits (if applicable);

(4) Death certificate or other relevant similar certificates approved by the hospital, public security department or PMIC (if applicable);

(5) The appraisal certificate of the degree of disability of the insured issued by the hospital at or above the second level or the medical institution, judicial appraisal institution or other appraisal institution recognized by PMIC (if applicable);

(6) Other materials related to this application that the claimant can provide.

If the claim applicant cannot provide the above supporting materials for special reasons, he/she shall provide other relevant supporting materials recognized by law to file the claim. If the claim applicant fails to provide relevant materials, which causes PMIC to be unable to verify the authenticity of the application, PMIC will not be responsible for paying the insurance benefits for the part that cannot be verified.

After receiving the compensation request and complete claim information from the claimant, PMIC will make a timely verification. If the situation is complex and the approval cannot be made within the time limit prescribed by the law, both parties agree to extend it appropriately, but the maximum time limit for extension shall not exceed 30 days.

PMIC shall notify the applicant of the verification result; For those who are subject to insurance liability, they shall perform the obligation of compensation for the insurance benefits within ten days after reaching an agreement with the claimant to pay the insurance benefits. If there is an agreement on the time limit for payment of the insurance benefits in this contract, PMIC shall perform the obligation of payment of the insurance benefits in accordance with the agreement. After the verification is made in accordance with the provisions of the preceding paragraph, PMIC shall, within the time limit prescribed by law, issue a notice of refusal to pay the insurance benefits to the claim applicant and explain the reasons for the refusal.

The limitation period of action for the relevant claim applicants under this contract to claim compensation or pay insurance benefits to PMIC shall be subject to the applicable laws, and shall be calculated from the date when they know or should know the occurrence of the insurance accident.

**第二十二条 补充索赔证明和资料的通知**

如果本社认为索赔申请人提供的有关索赔的证明和资料不完整的，将会及时一次性通知索赔申请人补充提供。

Article 22 Notice of Supplementary Claim Certificates and Materials

If PMIC believes that the evidence and information provided by the claim applicant is incomplete, it will notify the claim applicant in a timely and one-time manner to supplement.

**第二十三条 先行赔付义务**

本社自收到给付保险金的请求和有关证明、资料之日起六十日内，对其给付的数额不能确定的，将会根据已有证明和资料可以确定的数额先予支付；本社最终确定给付的数额后，将会支付相应的差额。

Article 23 Obligation to pay compensation in advance

Within 60 days from the date of receipt of the request for payment of the insurance benefits and relevant certificates and materials, if the amount of the insurance benefits cannot be determined, the Society will pay the amount that can be determined according to the existing certificates and materials; After the amount of payment is finally determined by PMIC, the corresponding difference will be paid.

**第二十四条 失踪的处理**

在本合同有效期内，被保险人因遭遇意外事故而失踪，后经法院宣告为死亡，本社将视此情况为意外事故而导致身故，给付身故保险金。**若于日后发现被保险人生还时，身故保险金的受领人必须将已领取的意外身故保险金于30日内返还本社。**

**Article 24 Treatment of disappearance**

**During the period of validity of this contract, the insured disappeared due to an accident and was later declared dead by the court. PMIC will pay the death insurance benefits according to the death caused by the accident. If the insured is found to be alive in the future, the recipient of the death insurance benefits must return the received accident death insurance benefits to the company within 30 days.**

**第二十五条 身体检查及司法鉴定**

在申请索赔期内，本社有权要求被保险人作身体检查或提供有关的检验报告。如被保险人身故，本社有权要求司法鉴定机构对保险事故进行鉴定。

Article 25 Physical examination and judicial expertise

During the claim period, PMIC has the right to require the insured to undergo physical examination or provide relevant inspection reports. In case of the death of the insured, PMIC has the right to request the judicial appraisal institution to appraise the insured accident.

**第二十六条 保险金结算汇率**

**理赔时，如需由外币转换为人民币支付，则本社在支付保险金时所适用的汇率****以保险事故发生当日中国人民银行公布的人民币汇率中间价为准。**

**Article 26 Exchange rate for insurance settlement**

**When settling claims, if it is necessary to convert foreign currency into RMB for payment, the exchange rate applicable to the payment of insurance benefits by PMIC shall be subject to the central rate of the RMB exchange rate published by the People's Bank of China on the day of the occurrence of the insurance accident.**

**第九章 其它**

**第二十七条 争议的处理**

在本合同或其附加合同履行过程中发生任何争议，其解决方式由当事人根据合同约定从下列两种方式中选择一种：

（1）因履行本合同或其附加合同发生的争议，由当事人协商解决。协商不成的，提交双方约定的仲裁委员会仲裁；

（2）因履行本合同或其附加合同发生的争议，由当事人协商解决。协商不成的，依法向人民法院起诉。

Chapter IX Others

Article 27 Settlement of disputes

In case of any dispute during the performance of this contract or its additional contract, the parties shall choose one of the following two ways to solve it according to the contract:

(1) Any dispute arising from the performance of this contract or its additional contract shall be settled by the parties through negotiation. If the negotiation fails, it shall be submitted to the arbitration commission agreed by both parties for arbitration;

(2) Any dispute arising from the performance of this contract or its additional contract shall be settled by the parties through negotiation. If the negotiation fails, a lawsuit shall be brought to the people's court according to law.

**第二十八条 法律适用**

本合同及其附加合同均适用中华人民共和国法律（仅为本保险之目的，不包括香港、澳门特别行政区及台湾地区的任何法律）。

Article 28 Law application

This Contract and its additional contracts shall be governed by the laws of the People's Republic of China (for the purpose of this insurance only, excluding any laws of Hong Kong, Macao Special Administrative Region and Taiwan).

**第二十九条 释义**

一、本合同所称的意外事故：是指因遭遇外来的、突发的、非本意的、非疾病的、不可预见的客观事件，并以此为直接原因导致其身体伤害、残疾或身故。**为避免疑义，****任何情形导致的猝死以及由于高原反应导致的身故均不属于本合同承保的意外事故。**

二、本合同所称的战争：是指不同国家或民族之间，或同一国家或民族至少控制特定区域内事实上权力机构及指挥武装力量的不同群体之间的敌对行为，包括由特定武装力量的成员指挥的或实施的以战争为诉求的事件。

三、本合同所称的不可抗力：是指不能预见、不能避免并不能克服的客观情况。

四、本合同所称的严重身体伤害：是指因意外事故或疾病而致身体伤害，且经由医生诊查，确定其身体状况可构成生命危险。

五、本合同所称的索赔申请人：指本合同的被保险人、身故保险金受益人、被保险人的法定继承人或法律规定享有保险金请求权的其他人。

六、本合同所称的身故保险金的受领人：指本合同的身故保险金受益人、被保险人的法定继承人或法律规定享有保险金请求权的其他人。

**七、本合同所称的医院：是指本社指定的医疗机构或符合下列所有条件的机构：**

1.拥有合法经营执照；

2.设立的主要目的为向受伤者和患病者提供留院治疗和护理服务；

3.有合格的医生和护士提供全日二十四小时的医疗和护理服务；

4.非主要作为康复、护理、疗养、戒酒、戒毒或类似的医疗机构。

**若因罹患疾病而于境内医院进行治疗，医院必须是符合上述条件的二级或三级公立医院。**

八、本合同所称的境内：是指中国大陆地区，不包括台湾省、香港及澳门特别行政区。

九、本合同所称的境外：是指中国大陆以外的国家和地区，包括台湾省、香港及澳门特别行政区。

十、本合同所称的医生：是指在医院内行医并拥有处方权的医生，亦指在被保险人接受诊断、医疗、处方或手术的地区内合法注册且有行医资格的医生，**医生不能为该被保险人本人或其直系亲属。**

十一、本合同所称的直系亲属：是指被保险人的配偶、父母、子女、兄弟姐妹、（外）祖父母、（外）孙子女、配偶的父母。

**十二、本合同所称的****受保前已存在的受伤：是指被保险人于其在本合同项下获保前两年内曾因受伤出现任何症状而使一正常而审慎的人寻求诊断、医疗护理或医药治疗；或被保险人于其在本合同项下获保前两年内曾经医生推荐接受医药治疗或医疗意见。**

十三、本合同所称的利率：是指同期中国人民银行每月第一个营业日已颁布生效的三个月居民定期储蓄存款利率。

十四、本合同所称的公共交通工具：是指领有有关政府主管部门依法颁发的公共交通营运执照，以收费方式合法载客的公共汽车、长途汽车、出租车（仅限四轮机动车）、渡船、气垫船、水翼船、轮船、火车、有轨电车、轨道列车（包括地铁、轻轨及磁悬浮列车）、经营固定航班的航空公司或包机公司经营的固定翼飞机、航空公司所经营的且在两个固定的商业机场之间或有营运执照的商业直升机站之间运营的直升飞机和任何按固定的路线和时刻表运营的固定机场客车。

**凡上述所列的各种交通工具用于非公共交通工具的目的和用途，均属不符合本合同公共交通工具的定义。**

十五、本合同所称的住院：是指被保险人经医生建议入住医院达二十四小时以上且由医院收取病房或床位费用。

十六、本合同所称的传染病：是指具有流行性和传染性的疾病，且相关政府部门或世界卫生组织（WHO）已发出高级别疫情警告或类似通告建议不适宜到受疫情影响地区旅行。

十七、本合同所称的高风险活动：是指极易对身体造成伤害或危及生命的活动，具体详见附录一。

十八、本合同所称的未满期净保险费：指本保险合同所具有的最低现金价值，若保险费为一次性支付的：未满期净保险费=净保险费×（1-m/n），其中，m为已生效天数，n为保险期间天数，经过日期不足一日的按一日计算，净保险费=保险费×（1-退保费用率），具体退保费用率在保险单中载明，个人业务退保费用率不超过35%，团体业务退保费用率不超过25%。

若保险费为分期支付的：未满期净保险费=当期净保险费×（1-m/n），其中，m为当期已生效天数，n为当期天数，经过日期不足一日的按一日计算，当期净保险费=当期保险费×（1-退保费用率），具体退保费用率在保险单中载明，个人业务退保费用率不超过35%，团体业务退保费用率不超过25%。

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**Article 29 Interpretation**

**1、 The accident mentioned in this contract refers to the physical injury, disability or death caused by external, unexpected, unintentional, non-disease and unforeseeable objective events. For the avoidance of doubt, sudden death caused by any situation and death caused by altitude reaction are not accidents covered by this contract.**

**2、 The war referred to in this contract refers to the hostilities between different countries or nationalities, or between different groups that control the de facto authority and command the armed forces in a specific area at least by the same country or nationality, including the events directed or carried out by the members of the specific armed forces with the war as the demand.**

**3、 Force majeure referred to in this contract refers to objective conditions that cannot be foreseen, avoided and overcome.**

**4、 The term "serious bodily injury" in this contract refers to the bodily injury caused by an accident or disease and determined by a doctor to be life threatening.**

**5、 The claim applicant referred to in this contract refers to the insured, the beneficiary of death insurance benefits, the legal heir of the insured or other persons who have the right to claim insurance benefits according to the law.**

**6、 The beneficiary of the death insurance benefits mentioned in this contract refers to the beneficiary of the death insurance benefits, the legal heir of the insured or other persons who have the right to claim the insurance benefits according to the law.**

**7、 The hospital referred to in this contract refers to the medical institution designated by PMIC or the institution that meets all the following conditions:**

**1. Have a legal business license;**

**2. The main purpose of the establishment is to provide hospital treatment and nursing services for the injured and sick;**

**3. There are qualified doctors and nurses to provide 24-hour medical and nursing services;**

**4. It is not mainly used as a medical institution for rehabilitation, nursing, recuperation, alcoholism, detoxification or similar.**

**If the patient is treated in a domestic hospital due to illness, the hospital must be a secondary or tertiary public hospital meeting the above conditions.**

**8、 The term "domestic" in this contract refers to the Chinese Mainland, excluding Taiwan Province, Hong Kong and Macao Special Administrative Region.**

**9、 Overseas referred to in this contract refers to countries and regions outside Chinese Mainland, including Taiwan Province, Hong Kong and Macao Special Administrative Region.**

**10、 The doctor referred to in this contract refers to the doctor who practices medicine in the hospital and has the prescription right, and also refers to the doctor who is legally registered and qualified to practice medicine in the area where the insured receives diagnosis, medical treatment, prescription or surgery. The doctor cannot be the insured himself or his immediate relatives.**

**11、 The immediate relatives mentioned in this contract refer to the insured's spouse, parents, children, brothers and sisters, grandparents, grandchildren and parents of the spouse.**

**12、 The term "injury existing before insurance" as mentioned in this contract refers to that the insured has caused a normal and prudent person to seek diagnosis, medical care or medical treatment due to any symptoms of the injury within two years before the insured is insured under this contract; Or the insured has been recommended by a doctor for medical treatment or medical advice within two years before being insured under this contract.**

**13、 The interest rate referred to in this contract refers to the three-month fixed deposit interest rate of residents issued by the People's Bank of China on the first business day of each month in the same period.**

**14、 The public transport vehicles mentioned in this contract refer to the buses, long-distance buses, taxis (only four-wheel motor vehicles), ferries, hovercraft, hydrofoil boats, steamers, trains, trams, rail trains (including subways, light rail and maglev trains) that have the public transport operation license issued by the relevant government authorities according to law and can legally carry passengers by charging The fixed-wing aircraft operated by airlines or charter companies that operate fixed flights, helicopters operated by airlines and operated between two fixed commercial airports or commercial helicopter stations with operating licenses, and any fixed airport buses operated according to fixed routes and schedules.**

**The purpose and use of all kinds of transportation vehicles listed above for non-public transportation vehicles do not conform to the definition of public transportation vehicles in this contract.**

**15、 The hospitalization referred to in this contract refers to the insured staying in the hospital for more than 24 hours after being recommended by the doctor and charged by the hospital for the ward or bed.**

**16、 The infectious disease mentioned in this contract refers to the epidemic and infectious disease, and the relevant government department or the World Health Organization (WHO) has issued a high-level epidemic warning or similar notice suggesting that it is not suitable to travel to the affected area.**

**17、 High-risk activities mentioned in this contract refer to activities that are very likely to cause physical injury or endanger life. See Appendix I for details.**

**18、 The unexpired net premium referred to in this contract refers to the minimum cash value of this insurance contract. If the premium is paid at one time, the unexpired net premium=net premium × (1-m/n), where m is the number of days in effect, n is the number of days in the insurance period, if the expiry date is less than one day, it will be calculated as one day, and the net insurance premium=insurance premium × (1 - surrender expense rate). The specific surrender expense rate is stated in the insurance policy. The surrender expense rate of individual business shall not exceed 35%, and the surrender expense rate of group business shall not exceed 25%.**

**If the insurance premium is paid in installments: net premium before expiration=net premium for the current period × (1-m/n), where m is the number of days in effect in the current period, n is the number of days in the current period, and if the expiry date is less than one day, it will be calculated as one day, and the current net insurance premium=the current insurance premium × (1 - surrender expense rate). The specific surrender expense rate is stated in the insurance policy. The surrender expense rate of individual business shall not exceed 35%, and the surrender expense rate of group business shall not exceed 25%.**

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**附录一：**

**高风险活动列表**

**本保险不予承保的高风险活动具体包括下列各项：**

**1. 以下高危活动：**

**（1）极限运动（见注释1）；**

**（2）竞技体育（见注释2）；**

**（3）可以或可能获得或收到任何酬劳、捐赠、赞助或经济回报的职业体育运动或其他运动；**

**（4）速度赛；**

**（5）探险（见注释3）；**

**（6）非由有资质的商业运营者提供的狩猎活动；**

**（7）滑雪道外的滑雪或滑雪板运动；**

**（8）四级或以上急流漂筏；**

**（9）领海以外区域进行航海；**

**（10）水肺潜水**，但具备CMAS国际潜水合格证、潜水教练专业协会（PADI）资质证书或其它类似资质认证证书或在合格教练陪伴下潜水的除外。**在前述除外情形下，潜水深度不得超过所获CMAS国际潜水合格证、PADI资质证书或其它类似资质认证证书所注明的深度，最大潜水深度以30米为限，且个人不得独自潜水，否则该潜水活动仍应被视为高危活动；**

**（11）摩托车运动，**但若同时满足下列所有条件的除外：

1）操控摩托车的人员（包括操控摩托车的被保险人）持有该摩托车所行驶国家颁发的或认可的有效摩托车驾照；

2）摩托车排量在126毫升以下；或当摩托车排量为126毫升或以上时，被保险人或操控摩托车的人员持有所操作摩托车的有效行驶证；

3）在任何情况下，均须遵守当地的道路交通法规，同时佩戴摩托车头盔和相应安全设备。

**2. 以下探险攀登以及高原活动：**

**（1）户外攀岩或绳降；**

**（2）海拔6000米以上的任何活动。**

**注释1：极限运动**是指需要高水准专业能力、高度专业化器械或特殊技能的、挑战自身体能极限的极易对身体造成伤害或危及生命的体育运动，包括但不限于巨浪冲浪、冬季运动（如无舵雪橇、有舵雪橇、滑雪和滑雪板的跳跃或表演）、独木舟冲急流、悬崖跳水、马术跳跃赛、马球、特技表演以及自行车、摩托车、空中或海上船只速度赛或表演，但不包括经有资质的当地旅游经营者或活动提供方所提供的，普通大众参加不予限制（所述限制不包括身高、通常的健康或体能要求的警告）的旅游活动，**前提条件是该旅游活动必须遵循旅游经营者或活动提供方合格向导的督导和指导**。

**注释2：竞技体育**是指任何有体能要求的、特技类的、竞赛类的有组织体育活动或赛事（包括训练在内）， 包括但不限于自行车、三项全能、冬季两项、超级马拉松、马术、帆船及其他水上运动项目、足球、橄榄球、曲棍球、体操、撑杆跳、击剑、举重、射箭、射击、武术、拳击以及所有冬季体育运动项目。竞技体育不包括任何针对中小学生组织的包括上述体育项目在内的体育比赛。

**注释3：探险**是指明知在某种特定的自然条件下有失去生命或使身体受到伤害的危险，而以任何形式故意使自己置身其中的行为，包括但不限于以徒步形式前往高风险、难以到达或不适于居住的地区的旅行，任何江河海漂流，前往未曾勘察或未经开垦的地区，因科考研究或政治目的前往偏远地区，以及极地探险、徒步穿越沙漠或人迹罕见的原始森林等活动。对于上述未列举的其他情形，经有资质的旅游经营者或活动提供方所提供的、普通大众参加不予限制（所述限制不包括身高、通常的健康或体能要求的警告）的徒步(见注释5)和旅行不属于探险，**前提条件是该徒步或旅行必须遵循旅游经营者或活动提供方合格向导的督导和指导**。

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Appendix I:

List of high-risk activities

The high-risk activities not covered by this insurance include the following:

1. The following high-risk activities:

(1) Extreme sports (see Note 1);

(2) Competitive sports (see Note 2);

(3) Professional sports or other sports that can or may receive any remuneration, donation, sponsorship or financial return;

(4) Speed race;

(5) Exploration (see Note 3);

(6) Hunting activities not provided by qualified commercial operators;

(7) Skiing or snowboarding outside the ski track;

(8) Level 4 or above rapids rafting;

(9) Navigation in areas outside the territorial sea;

(10) Scuba diving, except those with CMAS international diving certificate, PADI qualification certificate or other similar qualification certificates or diving accompanied by qualified coaches. Under the above exceptional circumstances, the diving depth shall not exceed the depth indicated in the CMAS International Diving Certificate, PADI Certificate or other similar qualification certificates, and the maximum diving depth is limited to 30 meters, and individuals shall not dive alone, otherwise the diving activity shall still be considered as a high-risk activity;

(11) Motorcycle movement, except if all the following conditions are met at the same time:

1) The person who controls the motorcycle (including the insured who controls the motorcycle) holds a valid motorcycle driving license issued or recognized by the country where the motorcycle runs;

2) Motorcycle displacement is less than 126 ml; Or when the motorcycle displacement is 126 ml or more, the insured or the person who controls the motorcycle holds a valid driving license for the motorcycle;

3) In any case, you must comply with the local road traffic regulations and wear motorcycle helmets and corresponding safety equipment.

2. The following adventure climbing and plateau activities:

(1) Outdoor rock climbing or rope lowering;

(2) Any activity above 6000 meters above sea level.

Note 1: Extreme sports refer to sports that require high-level professional ability, highly specialized equipment or special skills, and challenge the limits of physical ability, which are very likely to cause physical injury or endanger life, including but not limited to wave surfing, winter sports (such as jumping or performance of sledge without rudder, sledge with rudder, skiing and snowboarding), canoe racing, cliff diving, equestrian jumping, polo The stunt performances and speed races or performances of bicycles, motorcycles, air or sea vessels, but excluding those provided by qualified local tourism operators or event providers, and the general public's participation in tourism activities that are not restricted (the said restrictions do not include the warning of height, general health or physical requirements), provided that the tourism activities must follow the supervision and guidance of the qualified guide of the tourism operator or event provider.

Note 2: Competitive sports refers to any organized sports activities or events (including training) with physical fitness requirements, stunts and competitions, including but not limited to cycling, triathlon, biathlon, super marathon, equestrian, sailing and other water sports, football, rugby, hockey, gymnastics, pole vault, fencing, weightlifting, archery, shooting, martial arts Boxing and all winter sports. Competitive sports do not include any sports competitions organized for primary and secondary school students, including the above sports.

Note 3: Adventure refers to the behavior that knowingly puts oneself in danger of losing life or causing physical injury under certain specific natural conditions, including but not limited to the travel to high-risk, inaccessible or uninhabitable areas by foot, any river and sea rafting, going to unexplored or uncultivated areas, and going to remote areas for scientific research or political purposes, And polar exploration, hiking through deserts or rare primitive forests. For other situations not listed above, the hiking (see Note 5) and travel provided by qualified tourism operators or event providers and not restricted by the general public (the restrictions do not include the warning of height, general health or physical fitness requirements) are not dangerous, provided that the hiking or travel must follow the supervision and guidance of the qualified guide of the tourism operator or event provider.

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