

INSURANCE TERMS AND CONDITIONS

Skier- and Activity Insurance - SkiStar

Valid from June 1 2021



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Insurance provider for this insurance is: Europæiske Rejseforsikring, A/S, CVR no. 62 94 05 14 through Europeiska ERV Filial, hereinafter called Europeiska ERV. Org. no. 516410-9208 Supervisory authority is the Danish Finanstilsynet.

This is a translation from Norwegian to English of the insurance conditions for "Alpin- og Aktivitetsforsikring vilkår gjeldende fra 1 juni 2021". In the event of a dispute regarding the content and interpretation of these terms and conditions, the original Norwegian wording shall always prevail.

CONSIDER THIS WHEN YOU READ THE TERMS AND CONDITIONS:

1. The insurance contract consists of terms and conditions and insurance certificate. The insurance certificate applies before the terms and conditions. The insurance certificate states which terms and conditions apply.
2. Limitations, exclusions and precautions/security directives are marked in grey.
3. All words in italics are defined at the end of the insurance conditions, under section "Definitions".

GENERAL INFORMATION ON THE INSURANCE

The insurance covers all costs paid in the event of cancellation of *arrangements* with SkiStar if you are obliged to cancel as a result of what is mentioned in point 2, as well as for new equipment in the event of theft or damage to equipment hired from SkiStar. It also includes accident insurance which covers medical disability, medical, dental and travel costs as well as death resulting from *an accident*.

A. WHO CAN TAKE OUT INSURANCE

The insurance applies to the policyholder. The policyholder is the person named in the hire contract, on the receipt or in the booking confirmation from SkiStar, provided that this person has reached the age of 18 and has a permanent residence within the EU/EEA.

The insurance can be taken out by any person who hires equipment or purchases an *arrangement* from SkiStar.

B. WHAT CAN BE INSURED

When hiring equipment, the policy covers:

- Hired equipment such as skis, snowboards, cycles (*objects*)
- Ruined holiday
- Medical disability, medical, dental and travel costs as well as death resulting from *an accident*

On purchasing an *arrangement*, the insurance covers:

- Ruined holiday
- Medical disability, medical, dental and travel costs as well as death resulting from *an accident*

C. WHEN SHOULD THE INSURANCE BE TAKEN OUT

The insurance policy should be taken out and paid for during the booking process for the *arrangement* or, alternatively, in connection with the hire of equipment.

D. WHEN THE INSURANCE APPLIES

The insurance applies from the time the premium is paid. The company's liability does not begin to run until the entire insurance premium has been paid.

When hiring equipment, the insurance applies during the period of the hire, according to the booking confirmation or the hire agreement.

When purchasing an *arrangement*, the insurance applies during the length of stay at the *destination* shown on the booking confirmation or receipt.

1. SKI INSURANCE/BIKE INSURANCE

1.1 What the insurance covers

The insurance covers the cost of damage to the insured *object* resulting from a sudden and unforeseen event. Damage also includes theft or loss. The policy covers the cost of new or equal-value *objects*.

1.2 Excess

1.2.1 Ski insurance

For persons up to and including 17 years of age, the excess is NOK 300.

For adults (18 and upwards), the excess is NOK 700

1.2.2 Bike insurance

For persons up to and including 17 years of age, the excess is NOK 1,000.

For adults (18 and upwards), the excess is NOK 3,000

1.3 Limitations/Exclusions

The insurance does not cover:

- embezzlement, fraud or illegal disposal
- damage caused through gross negligence or intent.
- damage which can be compensated under guarantee or has been covered through another insurance policy

If the insured has brought about an insured event through gross negligence or worsened its consequences, the compensation may be reduced or not paid at all. The decision shall be based on the degree of guilt, the course of the damage, whether the insured was in self-inflicted intoxication, and the circumstances otherwise.

1.4 Precautions/Security directives

The following precautions/security directives apply to the insurance:

- Insured *objects* must not be left unattended.
- Bicycles must be locked with a SSF approved cycle lock when they are left unwatched.
- Insured *objects* must not be stored outdoors at night in a car, roof box, on railings or in other unlocked storage area, "At night" means the time between 00.00 and 06.00.
- Ski equipment must not be used on closed or non-pisted trails/runs.
- Bicycles must not be used on unmarked routes/trails for cycling.

If you do not comply with the stated directives, this can lead to the compensation being reduced or not paid at all.

1.5 Actions to be taken in the event of damage

Contact SkiStar as soon as possible, via a service point at the *destination*. Enclose a copy of the hire agreement. For the theft of an *object*, a copy of the police report may also be required.

2. RUINED HOLIDAY

2.1 What the insurance covers

The insurance covers the cost of all or parts of an *arrangement* if you cannot participate in the *arrangement* due to:

- you suffering an *acute illness* or *accident*
- you have to cancel or terminate your trip because you must go home.

The insurance covers *the price of the arrangement per day* for the days of the holiday that have been ruined.

The circumstance causing the interrupted holiday must have occurred after the insurance was taken out and paid for.

The insurance must not give rise to a profit but will compensate only the financial loss suffered.

2.1.1 Daily rates in case of acute illness or accident

The insurance covers daily rates if:

- you are hospitalised as a result of *acute illness* or *accident*
- you cannot take part in the activity which was the main purpose, as a result of *acute illness* or *accident*

It is a requirement that you have a doctor's certificate issued by a registered *doctor* at *the travel destination* which shows the diagnosis and the number of days in which you have not been able to carry out the activity which was the main purpose.

The compensation is calculated from and including the date on which you visited the *doctor* or were hospitalised.

In the event of an accompanying child's illness / accident, the insurance reimburses daily rates for 1 parent if the child needs parental supervision and care. Compensation is paid for children from the age of 8 months up to and including the day the child turns 12 years old.

2.1.2 Daily rates in case of travel home

The insurance covers daily rates if you have to cut your stay at the *destination* short due to:

- Serious *acute illness* or *accident* which affects a *close relative* in your home country and which, for medical reasons, requires hospitalisation for at least three (3) days.
- Serious loss or damage occurring in your private residence or your own company's premises which, for financial reasons, requires your immediate presence, e.g. bankruptcy, major fire, break-in or water damage.

The compensation is calculated from and including the date on which you left *the destination* and began the journey home.

2.2 How the compensation is calculated

2.2.1 Daily rates

The originally planned travel period and *the price of the arrangement* are used to calculate the price per day of *the arrangement*.

The insurance covers the price per day of *the arrangement* based on the number of days of holiday which it can be confirmed were ruined.

The calculation is based on the number of days which *the arrangement* has been booked for according to the booking confirmation.

2.3 Maximum compensation

The maximum compensation amount is the total amount for *the arrangement* cost.

2.4 Excess

The insurance applies without an excess.

2.5 Precautions/Security directives

Alcohol, narcotics, sedatives or other intoxicants should not be used in such a way that you expose yourself to risk of bodily injury or unforeseen illness.

If you do not comply with the stated directives, this can lead to compensation being reduced or not paid at all.

2.6 Limitations/Exclusions

2.6.1 The insurance does not cover:

- Sunburn injuries as a result of too intensive sun exposure. Notwithstanding the above, compensation will however be provided if a *doctor*, according to a medical certificate, ordered you to completely avoid being in the sun.
- Bone fractures, sprains or ligament injuries in hands or fingers if they would not ruin the purpose of the trip.
- If compensation is being provided from another source.
- For ruined days of holiday after the originally planned travel period. Compensation can be paid only once per ruined day of holiday per insured person.

2.6.2 Compensation is not paid for daily rates:

- for sexually transmitted diseases
- for scheduled surgery and treatment and any subsequent complications as a consequence of this

- if compensation can be received from elsewhere by law, statute, convention or damages
- if compensation has been received from other insurance or equivalent protection.

2.7 Documentation in the event of a claim

- Medical certificate, copy of medical record from the treating *doctor* or hospital providing treatment. Information on diagnosis, treatment and duration of the illness must be included.
- In the event of travel home: Medical certificate, copy of medical record from the treating *doctor* or hospital in the country of residence, or copy of death certificate. In the event of a fire, break-in etc., you must submit a copy of the police report, damage report or fire report.
- Travel documents which show the *travel destination*, travel date and the purpose of the trip.

3. ACCIDENT INSURANCE

3.1 What the insurance covers

Accident insurance covers medical disability, medical and dental treatment not covered by the European Health Card, EHIC, travel costs as well as death resulting from *accident*.

The insurance is valid for SkiStar's resorts at Sälen, Åre, Vemdalen, Hammarbybacken, Trysil, and Hemsedal, 24 hours a day during the period of stay.

International visitors are covered if they are citizens of the EU, an EEA country or Switzerland, and they have a European Health Insurance Card, EHIC.

The insurance does not cover accident which occur outside the boundaries of SkiStar's resorts. The insurance does not apply to personal injuries that have occurred in connection with the use of a motor vehicle.

3.2 What is counted as accidental injury

"Accidental injury" means damage to the body caused by a sudden unforeseen external physical event that occurs during the insurance period.

Accidental injury are also considered:

- Rupture of the Achilles tendon and torsion stress to the knee.
- Injury arising through the use of medicinal preparations, procedures, treatment or examination. It applies only when the preparation is taken or the procedure, treatment or examination takes place as a result of accidental injury which is covered by this insurance policy.
- Infection resulting from tick bite, frostbite*, heatstroke* and sunstroke*.

* These physical injuries are regarded as having occurred on the day on which they appeared.

The insurance does not cover:

- Accidental injury – or the consequences thereof – which occurred before the period of the insurance.
- Accidental injury resulting from overstrain, one-sided movement or repetitive strain injury.
- Infection by bacteria, virus or other infectious matter.

- Deterioration in the state of health if this deterioration, in the view of experienced medical practitioners, would probably have happened even if the accidental injury had not occurred.
- Injury arising from procedures, treatment or examination that was not occasioned by accidental injury covered by this insurance.
- From 18 years old and upwards: Injury arising from the insured carrying out or taking part in intentional criminal acts which could lead to imprisonment under Norwegian law.

Special limitations apply also to the treatment costs of dental injuries.

Please note the following in particular:

As is explained above, there are four criteria (physical injury, involuntary, sudden, external event) which must be met for an accidental injury in the meaning of the insurance terms and conditions to exist. This can lead to the situation where events that would be described as *accidents* in everyday speech are not defined as *accidents* in these terms and conditions.

3.3 Medical disability

3.3.1 What the insurance covers

The insurance pays out for permanent disability and death due to an *accident* which occurred during the trip.

3.3.2 Disability

The degree of disability is ascertained when your condition has stabilised, which means that your state of health is no longer expected to improve or change significantly. An assessment of the definitive degree of disability shall be made within three (3) years of the *accident*, but may be deferred as long as necessary on the advice of experienced medical practitioners or with reference to the availability of the necessary rehabilitation facilities. Injuries and symptoms caused by *the accident*, and which can be objectively established form the basis for the assessment of the degree of disability. Compensation is paid at a proportion of the capital amount equivalent to the degree of disability.

Medical disability triggered by injury shall be determined in accordance with the principle of separation. If the insured has an existing medical disability due to other personal injury, illness, pathological changes, physical or mental disabilities, etc. when the accident occurred, the medical disability triggered by injury shall be determined independently of the existing disability. The same applies to any other medical disability that arises in the time after the accident.

Europeiska ERV calculates the medical disability in accordance with the table used across the Swedish insurance industry. The calculation is based on the Office of Tables which applied on the date of injury.

The assessment is made independently of the effects of the injury on the ability to work or leisure interests.

Where a lost limb can be replaced by *prosthesis*, the degree of disability is assessed taking the function of the *prosthesis*

into consideration.

For the compensation to be payable, it is a requirement that you are alive on the payment date.

3.3.3 Death

The right to death benefit exists if the accidental injury leads to your death within three (3) years of the accident. If a one-off amount for disability has already been paid out for the same *accident* by Europeiska ERV or if there is an entitlement to such compensation but it has not yet been paid out, the death benefit shall be reduced by the amount of the disability benefit.

3.3.4 Beneficiary/Beneficiaries

Unless some other mandate has been notified to Europeiska ERV in writing, the death benefit is paid to the deceased's spouse or the deceased's heirs in accordance with FAL § 15-1.

3.3.5 The amount of benefit

The amount of benefit paid consists of that proportion of the insurance amount equivalent to the degree of disability.

Maximum compensation is provided in the event of 100% medical disability. For partial disability, a proportionate part of the insurance amount is paid.

Reduced functional ability and medical disability as a result of already existing injuries and health problems shall not be included in the compensation.

The assessment is made independently of the extent to which the insured person's ability to work is impaired.

From the year in which the insured person reaches the age of 46, the disability benefit is reduced by 5 percentage units per year, to a minimum of NOK 200,000.

If the accidental injury is caused by a nuclear reaction, unconnected with military operations in which the insured person was employed, the insurance compensation is limited to a maximum of NOK 200,000 in total per insured person no matter whether the insured person is covered by insurance under multiple policies with Europeiska ERV.

3.3.6 The right to compensation

The right to disability benefit arises when the accidental injury led to permanent disability of the insured person's bodily function, and the condition is stable and not life-threatening. "Stable condition" means that the condition does not change either for the better or the worse.

In the event of medical disability, the right to disability benefit arises at the earliest 12 months after the date on which the accidental injury occurred.

If, when the state of disability occurred, the definitive medical degree of disability could not be ascertained, where possible, payment will be made to the insured person in advance. This will be equivalent to the medical disability

which can be ascertained. When the final disability assessment is made, the amount paid out will be equivalent to the percentage increase in the degree of disability.

The compensation will be paid out to the insured person. If the insured person is a minor and the compensation on the date of pay-out exceeds 2 G (G=Folketrygdens grunnbeløp), the compensation will be paid to the local guardianship authority.

If the insured dies before the entitlement to disability benefit commences, no disability benefit is paid. If the right to disability benefit has commenced, the amount paid out will be equivalent to the ascertained definitive medical disability assessed to have existed at the time of death.

3.3.7 Possibility of reassessment of compensation if the disability increases

If the accidental injury causes a significant deterioration in the insured person's bodily function after Europeiska ERV has taken a final decision on the insured person's entitlement to compensation related to the accidental injury, the insured person has the right, on the grounds of the new circumstances, to have the degree of disability reappraised.

Accident insurance, adult:

A reappraisal of medical disability will be permitted if the insured person, no later than within ten years from the date on which the accidental injury occurred, submits written notification of his or her wish for a reappraisal to Europeiska ERV, and, at the same time provides information which may give rise to a right to reappraisal.

Accident insurance, child:

The right to reappraisal of medical disability continues up until the insured person's 30th birthday. The insured person must submit a written request for a reappraisal to Europeiska ERV and, at the same time provide information which may give rise to a right to reappraisal.

3.3.8 Maximum amount of compensation

Maximum amount of compensation:

- in the event of disability, the maximum is NOK 300,000
- in the event of death, the maximum is NOK 50,000

3.3.9 Limitations/Exclusions

Under no circumstances can the calculated degree of disability exceed 100 %.

- a) An existing physical infirmity cannot lead to a higher degree of disability than if that physical infirmity had not existed.
- b) the insurance does not cover conditions that are due to illness, deformity or lesions. Where the physical infirmity can be assumed to have resulted in a worsening of the consequences of the injury, compensation is paid only for the consequences arising independently of the physical infirmity and due solely to the accidental injury.
- c) The insurance does not cover injury caused by infection by bacteria, virus or other infectious matter.

3.3.10 Precautions/Security directives

Alcohol, narcotics, sedatives or other intoxicants should not be used in such a way that you expose yourself to risk of injury, as this can lead to the compensation being reduced or withheld entirely.

If you do not comply with the stated directives, this can lead to the compensation being reduced or not paid at all.

3.3.11 Documentation in the event of a claim

- Information on the name and address of the *doctor/-hospital* providing treatment at your *destination*.
- A copy of a doctor's certificate or medical notes concerning *the accident*.
- Police report, if available.
- Relevant healthcare information.
- Death certificate.
- Europeiska ERV may request that an autopsy is carried out and may also request to see the results.

3.4 Medical costs

In the event of *an accident*, compensation is paid for up to three (3) years from the date of the accident.

The insurance covers additional costs in the public health service in Norway, not covered by the European Health Insurance Card, EHIC and pays *necessary and reasonable costs* for:

- a) the cost of acute health care and emergency treatment for an *accident* which occurred during the trip
- b) hospitalisation, food and other associated hospital services for an *accident* which occurred during the trip.
- c) Medicines prescribed by the *doctor* providing treatment.
- d) Transport by ambulance or similar to the nearest suitable medical facility if Europeiska ERV judges that such transport is essential and appropriate due to lack of the necessary treatment at the present medical facility.

3.4.1 Limitations/Exclusions

- The *doctor* providing treatment at *the destination* must be registered, qualified and impartial.
- The cost of private medical care and treatment, as well as private surgery and the associated costs, are not covered by the insurance.
- The insurance does not cover medical costs once definitive medical disability benefit has been paid.

3.4.2 Precautions/Security directives

- The first visit to the *doctor* must be made during the trip.

3.4.3 Documentation in the event of a claim

Medical records or doctor's certificate from the *doctor* providing treatment at *the destination* setting out the diagnosis, treatment and costs.

3.5 Local travel costs

The insurance covers *necessary and reasonable additional costs* for local travel costs associated with medical care and treatment. For travel in a private car, NOK 1.80 per kilometre will be paid.

3.5.1 Limitations/Exclusions

The insurance does not cover:

- Travel costs once definitive medical disability benefit has been paid.
- Travel costs to and from private medical care.
- Travel by private car which has been lent without charge, is a company or service car or a fringe benefit car where no costs have arisen.

3.6 Dental accident

In the event of an accident requiring dental treatment during the trip, the insurance covers *essential and reasonable additional costs* for dental treatment in Norway. The treatment must have commenced while you are still at *the destination*, but can, if necessary, be completed elsewhere in Norway. It is required that *the dentist* is registered, qualified and impartial.

In the event of dental treatment due to *an accident* and where, according to *the dentist*, the treatment must be deferred; this can be approved if the treatment commences within three (3) years and has been concluded within five (5) years from the date of the accident. If the treatment has to be deferred on account of your age, it can be carried out before you are 25.

3.6.1 The amount of benefit

In the event of treatment involving a single dental implant, the maximum compensation payable will be 50 % of the price base amount. In the event of dental bridge therapy, the maximum compensation payable will be 50 % of the price base amount per abutment, but with a maximum of one price base amount for the whole implant treatment. The current price base amount at the pay-out date applies.

Treatment and fee must be approved in advance by Europeiska ERV. For essential emergency treatment, however, reasonable costs will be covered even if it was not possible to obtain approval.

The insured person must locate *a dentist* without delay and report the injury. If the insured person is above the age of 19, the report must be accompanied by a completed enquiry form provided by Europeiska ERV.

The insurance only covers the treatment of dental injuries caused by an accident. *Additional costs* arising from the treatment of the injury as a result of the insured's condition, poor dental health/oral hygiene are not covered.

The insurance only covers the treatment costs that would have been incurred if the mentioned conditions are eliminated.

Compensation is paid for damage to fixed dentures in accordance with the rules for damage to a natural tooth. This also applies to removable *dentures* which were in place in the mouth when they were damaged.

If the insurance has paid for final treatment of the dental injury, no further payment will be made under the insurance policy. Compensation may, however, be paid if deterioration has occurred which was not foreseeable at the time of final treatment and which is due to the accidental injury. This must take place within five years of the final treatment being

carried out.

For insured persons younger than 25, the following also applies:

If final treatment must be deferred to a later date due to the age of the insured person, the cost of this deferred treatment will also be covered on condition that Europeiska ERV had taken the decision to approve the deferred treatment before the insured person's 25th birthday but not, however, beyond the age of 30.

3.6.2 Limitations/Exclusions

The insurance does not cover:

- chewing or biting injuries
- normal or routine treatment
- if, before the trip, your teeth were weakened by fillings, root fillings or dental disease in the teeth, gums or in the jaw, if you have poor dental hygiene or have not undergone regular dental check-ups or have not completed a course of treatment which was recommended by the dentist.

3.6.3 Documentation in the event of a claim

Dental records from the dentist providing treatment at the destination or in your hometown if requested by Europeiska ERV.

GENERAL TERMS AND CONDITIONS

General exclusions

The insurance does not cover costs which – irrespective of your state of mind or mental soundness – are related to, caused by or arose as a direct or indirect consequence of:

- a) Intentionally causing the insured event.
- b) Active participation in war, riot or similar.
- c) Strike, lock-out, arrest, commandeering or other action by the authorities unless this is stated in the terms and conditions of the individual insurance policy.
- d) Nuclear process or nuclear reaction, nuclear fission, ionising radiation, radiation from radioactive fuel or waste, or chemical or biological substances.
- e) In the event of travel to countries/regions for which the Ministry of Foreign Affairs has issued a travel warning. The insurance will, however, continue to apply for up to 14 days if you are already in the affected country or region when the travel warning is issued, provided that you leave the region/are evacuated at the first possible opportunity.
- f) Suicide or attempted suicide.

The insurance also does not cover:

- g) Costs that can be compensated from another source according to law, ordinance, convention or damages.
- h) Costs that have been compensated from another insurance.

Choice of law and competent court

Unless otherwise stated in the insurance certificate, the Norwegian Insurance Contracts Act (Forsikringsavtaleloven, LOV-1989-06-16-69) (FAL) applies. Disputes in connection with this insurance agreement shall be decided by a court in Norway in accordance with Norwegian legal rules.

Double insurance

The insurance does not cover costs or claims which have already been settled by another insurance company or credit card company. Each insurance company is, however, liable towards you as if the insurance company was solely liable for the claim. The insurer has right of recourse, and the amount of liability will be allocated among the insurance companies in proportion to their respective amounts of liability.

When you make a claim, you are obliged to inform us of any insurance policies which have been taken out with other insurance providers and/or if you have paid for the trip using a debit or credit card which includes insurance cover.

Recourse and recovery of compensation

To the extent that you have received compensation under this insurance policy, Europeiska ERV joins in your right as the insured person in relation to third parties. The term "third parties" refers to private companies or public authorities/agencies in Sweden or abroad who are, or may become, liable to pay compensation or a proportion of the amount of compensation in connection with the settlement of a claim under this insurance. In such cases, the company has a right of recourse against the person responsible.

Reporting damage and payment of compensation

In the event of a claim, you must report the claim as soon as possible and no later than one year after you became aware of the circumstances that justify the claim. If the claim is not reported within one year, you lose the right to compensation, cf. FAL § 18-5.

In the event of damage to hired equipment, you must contact SkiStar as soon as possible, via the service point at the destination. The documents which must be enclosed with the report are listed under 1.5 above.

In the event of a claim for Ruined holiday or Accident, you must report the damage/injury as soon as possible by completing a report form on our website: www.erv.se. If you cannot fill in your damage report online, you can contact Europeiska ERV for assistance. The documents which must be enclosed with the claim are listed under 2.7 and 3.3.11 above.

Europeiska ERV will pay the compensation no later than one month from the date on which you reported the event and provided us with the information/documentation needed to settle the claim.

Limitations

If you do not submit a damage report in accordance with the above, this may lead to compensation being reduced or not paid at all.

Right of withdrawal

Cf. The Right of Withdrawal Act (Angerrettloven, LOV-2014-06-20-27) § 34, the policy holder has the right to regret the purchase of the insurance within 14 days from the time the agreement was entered into. The deadline is counted from the date on which the insurance contract is entered into, i.e.

when you received the insurance policy and the terms and conditions of the insurance. If you want to exercise your right of withdrawal, you must inform Europeiska ERV of this in writing before the deadline. If you decide to exercise your right of withdrawal, Europeiska ERV is entitled to request that you pay a proportional premium for the period during which the insurance was valid. For insurance policies with a period of insurance shorter than one (1) month, the right of withdrawal does not apply, cf. The Right of Withdrawal Act (Angerrettlöven) § 35 (b).

Causing an insured event

If the insured person has intentionally caused an insurance event, Europeiska ERV is freed from liability. The company is still liable if the insured, due to age or state of mind, could not understand the scope of the action.

If the insured person has brought about an insured event through gross negligence or worsened its consequences, the compensation may be reduced or entirely withheld. The same applies if the insured has grossly negligently caused the insured event by violating a safety regulation. The decision should be based on the degree of guilt, the course of the damage, if the insured was in self-inflicted intoxication, what effect the reduction or loss of the company's liability will have for the person who makes a claim on the insurance or for other persons who are financially dependent on him or her and the conditions otherwise.

Incorrect information

It is essential that all information, including information on health, which is submitted to Europeiska ERV is complete and correct. If information is withheld or if incorrect answers are provided to questions which may be important for Europeiska ERV to settle claims, compensation may be reduced or withheld entirely.

Personal data processing and disclosure of personal data

Europeiska ERV respects your personal privacy and makes every effort to achieve a high level of security in all processing of personal data. We use your personal data only for the purposes stated when you provide your personal data to us. Your personal data is stored only for as long as necessary to enable us to fulfil our obligations towards you, as our customer.

Europeiska ERV discloses your personal data to third parties only if we have your consent to do so or if we are required to do so by law. Every customer who has entered into a contract with Europeiska ERV can request to have, free of charge, an extract from the register showing the information we have saved on him or her. You are free to contact us at any time to change your data if, for example, you no longer wish to receive news and other information.

You have the right to request in writing to have the personal data on you which is stored by Europeiska ERV deleted. However, we cannot delete any personal data which we are required to retain by law. If we have information which we are required to retain by law, we will inform you of the reason why we cannot delete this information.

You can send such a request to:

Europeiska ERV, Dataskyddsombudet, Box 1, SE-172 13 Sundbyberg.

Corrections of Swedish civil registration numbers can be sent to the same address as above.

In the event of a claim, Europeiska ERV is permitted, if necessary, to disclose information which has been provided by you as the insured person to Europeiska ERV's service office and partners.

In addition, Europeiska ERV has the right to request information on your state of health and treatment from *doctors* and hospitals you have received treatment from. Europeiska ERV can request that you sign a power of attorney which gives Europeiska ERV the right to examine your medical records and other information.

Complaints

If you are not satisfied with our service or the handling of your claim, please contact the person who handled your case. If you are still not satisfied, you should send a written complaint to Europeiska ERV's Customer Ombudsman:

Europeiska ERVs Kundombudsman

kundambassaden@erv.se

www.erv.se

If you are not satisfied with the European ERV's complaint handling, you can send a written complaint to an external appeal body:

The Financial Appeals Board

(Finansklagenemnda)

The Financial Appeals Board (FinKN) is an industry-based and independent appeal body that handles appeals against banks, insurance companies, debt collection companies and other financial companies. The Financial Appeals Board shall, through out-of-court dispute resolution, contribute to the person who is entitled being granted justice. The tribunal's statements are indicative.

Finansklagenemnda
Postboks 53, Skøyen
0212 Oslo
post@finkn.no

An appeal to the Financial Appeals Board can also be created via the board's website by logging in via the ID portal (Bank ID) www.finkn.no

Court of general jurisdiction

If your complaint has not been successful, you can take your case to a court of law in Norway. You can obtain help with the costs of legal proceedings either through:

- legal expenses insurance or
- public legal aid, which provides a grant for legal costs after a means test in accordance with the Act on Free Legal Aid (Lov om fri rettshjelp, LOV-198006-13-35).

Transfer of compensation claim

No one has the right to pledge or transfer a right accruing to them under the insurance policy without obtaining written consent in advance from Europeiska ERV.

DEFINITIONS

Accidents are physical injuries which affect you involuntarily as a result of a sudden external event, i.e. violence to the body originating externally.

Acute illness and accident is a sudden and unexpected significant deterioration in the current state of health.

Additional costs are costs which you must pay solely as a result of compensable damage. If the costs would have been paid even if the damage had not occurred, the costs are not counted as *additional costs*.

A dentist is a medical professional specialising in dental problems or dental surgery.

Close relatives are spouses, cohabiting partners, registered partners, children, stepchildren, foster children, siblings, parents, stepparents, grandparents, parents-in-law, grandchildren, sons-in-law, daughters-in-law, brothers-in-law and sisters-in-law. The parents and siblings of cohabiting partners and registered partners are on a par with parents-in-law, brothers-in-law and sisters-in-law in these terms and conditions.

Necessary and reasonable costs are necessary costs which Europeiska ERV, taking account of the circumstances involved, could reasonably expect to be normal and customary.

Objects are equipment hired from SkiStar.

Prostheses are artificial body parts, including dentures and dental plates.

The arrangement may consist of all or parts of a SkiPass, LiftPass, ski hire, cycle hire, ski school, cycle courses or other activity which are offered to the general public by SkiStar and which have a price in accordance with an established price list. The items included will be shown on the booking confirmation or receipt.

The destination is the destination of the trip.

The doctor, unless otherwise specified in these terms and conditions, is the doctor who provided the treatment. He or she must be qualified to carry out the work, must be impartial and must possess a medical degree.

The price of the arrangement per day is non-refundable expenses for the arrangement divided by the originally planned number of travel days of the trip (both the day on which the outward journey is made and the day on which you return home are calculated as whole days, irrespective of the time of the outward travel or return journey). It is a condition that other tourist services are booked and paid for prior to the outward journey