ZURICH
蘇黎世

Zurich Policy Wording Online Service
蘇黎世網上查閱保單服務

THE BOYS' BRIGADE, HONG KONG
G/F BLCOK A
LOK MAN SUN CHUEN
TO KWA WAN
KOWLOON

A/C no. : 2100295
Policy no. : ZZG0002624ZC
Endorsement no. : 2026000

Dear Customer,

Zurich Insurance is committed to implementing environmentally-friendly initiatives in efforts to reduce carbon footprint. We are pleased to provide Zurich Policy Wording Online Service, which enables you to enjoy greater convenience while saving paper by viewing and downloading your policy wording specimen online anytime:

- Website: https://info.zurich.com.hk/policy/ZZG0715-AME.pdf
- Policy Wording Number: ZZG0715(AME)

If you wish to request for the official hard copy policy wording or should you have any enquiries, please contact your insurance intermediary.

Yours faithfully,
Zurich Insurance Company Ltd

親愛的客戶：

蘇黎世保險一直致力推行減碳的環保措施，現誠意爲您提供蘇黎世網上查閱保單服務，讓您可隨時以快捷及環保的方式透過互聯網查閱及下載您的保單樣本：

- 網址: https://info.zurich.com.hk/policy/ZZG0715-AME.pdf
- 保單條款編碼: ZZG0715(AME)

如欲索取保單正本或有任何查詢，請聯絡您的保險中介人。

此致
蘇黎世保險有限公司

Important notes: It is important to read insurance documents with care to make sure the insurance cover continues to meet your needs. The policy wording is a significant insurance document which contains the full terms, conditions and exclusions, and forms part of the insurance contract between you and us. For more details on Statement of purpose for collection of personal data and Rights of third parties, please visit: https://info.zurich.com.hk/policy/PICS.pdf

重要事項：請細閱保險文件以確保保險內容依然符合您的需要。保單內包括保障的內容、細則及不承保事項，是一份重要的保險文件，並構成您與本公司之間的合約的其中一部份。有關個人資料收集目的及第三者權益，請瀏覽 https://info.zurich.com.hk/policy/PICS.pdf。

POL-04-2019

This is a computer generated letter. No signature is required. 此爲電腦編印信件，毋須簽署。

Zurich Insurance Company Ltd (a company incorporated in Switzerland with limited liability)
25-26/F, One Island East, 18 Westlands Road, Island East, Hong Kong
Telephone 電話: +852 2968 2222 Fax 傳真: +852 2968 0639 Web site 網址: www.zurich.com.hk
For internal use only: RP8210

蘇黎世保險有限公司 (於瑞士註冊成立之有限公司)
香港港島東華蘭路18號港島東中心25-26樓

SCHEDULE

Insurers	ZURICH INSURANCE COMPANY LTD (a company incorporated in Switzerland with limited liability)
Policy Class	GROUP PERSONAL ACCIDENT
Policy No.	ZZG0002624ZC (AGT)
The Insured	THE BOYS' BRIGADE, HONG KONG
Postal Address	G/F BLCOK A LOK MAN SUN CHUEN TO KWA WAN KOWLOON
Other Interested Party/ Hire Purchase/ Mortgagee	NOT APPLICABLE
Business/ Occupation (And No Other For The Purpose of This Insurance)	AS PER INSURED EVENT
Period of Insurance	FROM 01/11/2026 TO 31/10/2027 (BOTH DATES INCLUSIVE)
Interest Insured	AS PER DETAILS IN CONTINUATION SCHEDULE AND/OR POLICY
Annual Premium	HKD*******63,000.00

Premium	:	HKD *******63,000.00
Add : IA LEVY		HKD**********63.00
Total payable	:	HKD *******63,063.00

Levy collected by the Insurance Authority (if any) has been imposed on this policy at the applicable rate and would be remitted in accordance with the prescribed arrangements. For further information, please visit http://www.zurich.com.hk/ia-levy

SIGNED FOR THE INSURERS



ZURICH INSURANCE COMPANY LTD

AUTHORISED SIGNATURE

Source	REGIONAL INS MANAGEMENT (INT'L) LTD (AGTSAGS)
A/C No.	2100295
Date of Proposal	25/09/2009
Date Policy Signed	23/10/2026

ELIGIBLE PERSON : 6,000 UNNAMED MEMBERS WHEN PARTICIPATING IN &/OR ATTENDING THE INSURED EVENT ORGANIZED / SUPERVISED / ARRANGED BY THE INSURED.

OPERATIVE PERIOD OF INSURANCE : COVERAGE SHALL COMMENCE WHEN THE INSURED PERSON ARRIVES AT THE APPOINTED MEETING POINT FOR THE PURPOSE OF PARTICIPATING IN THE INSURED EVENTS, AND CEASES WHEN HE/SHE LEAVES THE APPOINTED DISMISSAL POINT UPON COMPLETION OF THE INSURED EVENTS OR WHEN THE INSURED PERSON DISPERSES FROM THE GROUP, WHICHEVER IS EARLIER.

INSURED EVENT : UNIFORMED GROUP, NON-UNIFORMED GROUP & SOCIAL SERVICES ACTIVITIES IN HONG KONG ONLY (DETAILS AS PER LIST LODGED WITH THE INSURERS)

LOCATION OF INSURED EVENT : ANYWHERE WITHIN HONG KONG

INSURED EVENT DETAILS : (DETAILS AS PER LIST LODGED WITH THE INSURERS)

AGE LIMIT : 1-80

COMPENSATION TABLE : SCALE I (EVENT)

MINIMUM PREMIUM (EXCLUDE IA LEVY) : HKD1,500

PREMIUM PER PERSON : HKD10.5

GEOGRAPHICAL LIMIT : HONG KONG

POLICY ADMINISTRATIVE METHOD : ANNUAL UNNAMED POLICY (EVENT BASED AND FLAT PREMIUM)

TABLE OF BENEFITS (SUM INSURED PER INSURED PERSON - HKD)

BENEFIT LEVEL	ACCIDENTAL DEATH AND DISABLEMENT	ACCIDENTAL MEDICAL EXPENSES (PER ACCIDENT)	SECOND AND THIRD DEGREE BURNS
A	200,000	3,000	NOT COVERED

ADDITIONAL BENEFITS : 1. ZURICH EMERGENCY ASSISTANCE SERVICES - NOT COVERED

ADDITIONAL POLICY TERMS AND CONDITIONS

ADDITIONAL BENEFITS TO THE POLICY :

IT IS HEREBY NOTED AND AGREED THAT THE FOLLOWING BENEFIT(S) ARE ADDED TO THE POLICY :

ACCIDENTAL MEDICAL EXPENSES FOR EVENT BASE ANNUAL POLICY (A86.1-01/13)

REVISE OF SECTION 2 - ACCIDENTAL MEDICAL EXPENSES

IT IS HEREBY NOTED AND AGREED THAT SECTION 2 OF THE POLICY IS DEEMED TO BE DELETED AND REPLACED BY THE FOLLOWS:

SECTION 2 - ACCIDENTAL MEDICAL EXPENSES

IN THE EVENT THAT THE INSURED PERSON SUSTAINS INJURY AS A RESULT OF A COVERED ACCIDENT, WE SHALL REIMBURSE THE INSURED PERSON, SUBJECT TO THE DEDUCTIBLE (IF ANY) AS STATED ON THE SCHEDULE, ALL ACTUAL MEDICAL EXPENSES, INCLUDING FOLLOW-UP ACCIDENTAL MEDICAL EXPENSES WITHIN NINETY (90) DAYS FROM THE DATE OF ACCIDENT, WHICH HAVE ALREADY BEEN PAID TO A DULY REGISTERED MEDICAL PRACTITIONER, QUALIFIED NURSE AND/OR HOSPITAL. SUCH MEDICAL EXPENSES INCLUDE SURGICAL EXPENSES, X-RAY, HOSPITAL CHARGES, NURSING TREATMENT EXPENSES AND/OR AMBULANCE HIRE, BUT EXCLUDING THE COST OF DENTAL TREATMENT UNLESS SUCH TREATMENT IS NECESSARILY INCURRED TO MAINTAIN SOUND AND NATURAL TEETH AND IS CAUSED BY AN ACCIDENT (EXCLUDING DENTURE AND RELATED EXPENSES).

IN THE EVENT THAT THE INSURED PERSON IS ENTITLED TO A REFUND OF ALL OR PART OF THE EXPENSES UNDER SECTION 2 - ACCIDENTAL MEDICAL EXPENSES FROM ANY OTHER SOURCE, WE WILL ONLY BE LIABLE FOR THE SHORTFALL OF THE REIMBURSEMENT AMOUNT WHICH IS NOT RECOVERABLE FROM SUCH OTHER SOURCE.

THE MAXIMUM AMOUNT WE WILL PAY UNDER SECTION 2 IN RESPECT OF ANY ONE (1) INSURED PERSON PER ACCIDENT SHALL NOT EXCEED THE SUM INSURED SHOWN IN THE SCHEDULE.

EXTENSIONS TO THE POLICY :

IT IS HEREBY NOTED AND AGREED THAT THE FOLLOWING EXTENSION(S) ARE ADDED TO THE POLICY :

EXTENSION FOR CHINESE BONESETTERS AND ACUPUNCTURISTS
UNDER SECTION 2 - ACCIDENTAL MEDICAL EXPENSES (A87.1-01/13)

THIS SECTION IS EXTENDED TO COVER THE INSURED PERSON THE ACTUAL ACCIDENTAL MEDICAL EXPENSES PAID TO CHINESE BONESETTERS OR ACUPUNCTURISTS AS A RESULT OF A COVERED ACCIDENT, INCLUDING FOLLOW-UP ACCIDENTAL MEDICAL EXPENSES WITHIN NINETY(90) DAYS FROM THE DATE OF ACCIDENT. SUBJECT TO HKD150 PER VISIT PER DAY, --- PER ACCIDENT AND UP TO HKD2,000 PER POLICY PER INSURED PERSON.

ADDITIONAL GENERAL EXCLUSIONS TO THE POLICY :

IT IS HEREBY NOTED AND AGREED THAT THE FOLLOWING EXCLUSION(S) ARE ADDED TO THE POLICY :

(1) STUNT OR AERIAL WORK

(2) FIRE OR EXPLOSIVE WORK

(3) THE INSURED PERSON'S PARTICIPATION IN ANY BRAWL

ADDITIONAL GENERAL CONDITIONS TO THE POLICY :

IT IS HEREBY NOTED AND AGREED THAT THE POLICY IS SUBJECT TO THE FOLLOWING CONDITIONS :

(1) THE INSURED PERSON MUST COMPLIED WITH THE SAFETY MEASURES AND/OR SAFETY REQUIREMENT SET BY THE RELEVANT AUTHORITY AND/OR EVENT ORGANISER AND/OR EVENT PROVIDER.

(2) AT LEAST ONE QUALIFIED COACH / TRAINERS / SUPERVISOR MUST BE ATTENDED FOR EACH INSURED EVENT.

(3) ANY PARTICIPANTS AGED BELOW 10 YEARS OLD, AT LEAST ONE ADULT (AGED OVER 18 OR ABOVE) MUST ATTEND IN THE ACTIVITY.

POLICY ADMINISTRATIVE METHOD
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ANNUAL UNNAMED POLICY (EVENT BASED AND FLAT PREMIUM) (A101.1-04/13)

(A) NO INDIVIDUAL NAME DECLARATION IS REQUIRED DURING THE PERIOD OF INSURANCE AS STATED IN THE SCHEDULE, WE RESERVE THE RIGHT TO VERIFY THE LIST OF INSURED PERSONS IN THE BOOK OF RECORD KEPT BY YOU IN CASE OF ANY LOSSES OCCURS.

(B) UPON POLICY ANNIVERSARY, YOU SHOULD DECLARE AND PROVIDE THE UPDATE ACTIVITIES / EVENTS LIST TO US BY WRITTEN NOTICE REGARDING THE ACTUAL NUMBER OF INSURED PERSONS AND EVENT DETAILS FOR THE CALCULATION OF THE RENEWAL PREMIUM.

OTHER TERMS AND CONDITIONS AS PER OUR STANDARD POLICY WORDING.

DETAILS OF INSURED PERSON :-

ITEM NO.	CATEGORY	BENEFIT LEVEL	NO. OF INSURED PERSON
1	MEMBERS	A	6000

OCCURRENCE LIMIT	: HKD	5,000,000
CONVEYANCE LIMIT	: HKD	5,000,000
AGGREGATE TERRORISM LIMIT	: HKD	5,000,000
GEOGRAPHICAL LIMIT	: HONG KONG	

ZURICH
蘇黎世

24小時緊急支援熱線

歡迎您成為我們的尊貴客戶。現謹隨函附上24小時緊急支援服務卡，您可隨身攜備以享有緊急支援服務。

當您需要協助

當您需要我們就保單中所述的緊急援助服務提供協助時，可致電香港蘇黎世24小時緊急支援熱線：+852 2886 3977，並提供您的姓名及載於附表上的保單號碼。我們的資深援助主任會幫忙及處理您的查詢及提供協助。

如您有任何疑問，可致電以下熱線查詢。

- 有關您的保單之查詢：***+852 2968 2288***
- 蘇黎世24小時緊急支援熱線：***+852 2886 3977***

24-hour emergency assistance hotline

We are pleased to welcome you to become our valued customer. Please find your 24-hour emergency assistance card and you can bring along with you to enjoy the emergency assistance benefits.

What to do when you need help?

When you need our emergency assistance service as stated in your policy, call our 24-hour Zurich emergency assistance hotline in Hong Kong via +852 2886 3977 and quote your name and the policy number printed on the schedule. An experienced assistance coordinator will help you on your query.

If you have any questions, please contact us via the following hotlines:

- Enquiry on your policy: ***+852 2968 2288***
- Zurich 24-hour emergency assistance hotline: ***+852 2886 3977***



Compensation Table (Scale I)

Events		Percentage of Sum Insured
1.	Death	100%
2.	Permanent Total Disablement.	100%
3.	Permanent and Incurable Paralysis of all Limbs	100%
4.	Permanent Total Loss of Sight of both Eyes	100%
5.	Permanent Total Loss of Sight of one Eye	100%
6.	Loss of or the Permanent Total Loss of use of two Limbs	100%
7.	Loss of or the Permanent Total Loss of use of one Limb	100%
8.	Loss of Speech and Hearing	100%
9.	Permanent and Incurable Insanity	100%
10.	Permanent Total Loss of Hearing in	
	(a) Both Ears	75%
	(b) One Ear	15%

Compensation:

(a) Benefit shall not be payable for more than one (1) of the Events 1-10 in respect of the same accident. Should more than one (1) of the Events sustain from the same accident, only the Event with the highest compensation will be payable under Section 1.

(b) Cover for any *insured person* under this policy shall terminate upon the occurrence of any compensation for which indemnity is payable under any one (1) of the above Events, but such termination shall be without prejudice to any claim originating out of the *accident* causing such loss.

(c) When a limb or organ which had been partially disabled prior to an injury covered under the policy and which becomes totally disabled as a result of such injury, the Percentage of Sum Insured payable shall be determined by *us* having regard to the extent of disablement caused by the covered injury. However, no payment shall be made in respect of the loss of a limb or organ which was totally disabled prior to the injury.