

PRODUCT DISCLOSURE SHEET: ACTIVE LIFESTYLE COVER

(Read this Product Disclosure Sheet before you decide to take up ACTIVE LIFESTYLE COVER. Be sure to also read the general terms and conditions.)

1. What is this product about?

These are the monthly renewable non-participating term riders that provide additional coverage up to age 50 to complement the basic plan GOLIFE.

The riders consist of the following:

- Accidental daily hospital income benefit rider
- Broken bones benefit rider
- Accident & emergency recovery benefit rider

2. What are the covers/benefits provided?

Riders	Sum assured (RM)
Accidental daily hospital income benefit <ul style="list-style-type: none"> • Provides daily income in the event the life assured is hospitalised due to accidental causes 	100 per day (maximum 60 days per calendar year)
Broken bones benefit <ul style="list-style-type: none"> • Provides lump sum benefit in the event the life assured sustains injury due to accidental causes which results in bone fracture/dislocation 	500 per calendar year (maximum 1 claim per calendar year)
Accident & emergency recovery benefit <ul style="list-style-type: none"> • Provides lump sum benefit when the life assured requires emergency outpatient or inpatient treatment in the Accident & Emergency (A&E) department within 24 hours of the accident 	200 per event (maximum 2 claims per calendar year)

Notes:

- The e-certificate will be renewed every month before the life assured's 50th birthday. However, this renewal is subject to premium payment and the terms and conditions mentioned in the master policy documents.

3. How much premium do I have to pay?

The monthly premium amount is RM 7.00.

The premium that you have to pay is not guaranteed and may be revised, as explained in question 5 below under "Non-guaranteed Premium".

Premium duration: up to age 50 of the life assured.

4. What are the fees and charges that I have to pay?

- Commission – 10% from the premium paid.

5. What are some of the key terms and conditions that I should be aware of?

- **Importance of disclosure** – you must disclose all material facts fully and correctly such as health condition, full name as per National Registration Identity Card (NRIC), NRIC number, age or date of birth and other information as required during enrolment. If the certificate of insurance is intended wholly for your personal purposes, you must take reasonable care not to make a misrepresentation in disclosing the required information and to disclose any other facts that you know to be relevant to us. If it is proven there is a misrepresentation or suppression of material fact, only the remedies in Schedule 9 of the Financial Services Act 2013 will apply in which it may result in avoidance of your certificate of insurance, refusal or reduction of your claim(s), change of terms or termination of your certificate of insurance. The obligation of continuous disclosure is your responsibility until the certificate of insurance is issued, varied or renewed.
- **Free look period** – you may cancel your e-certificate within 15 days from the delivery date of the first e-certificate. Any premium paid by the certificate owner will be refunded if certificate owner cancels the insurance coverage during the free look period.
- **Non-guaranteed premium** – the premiums are not guaranteed and may be revised from time to time. At least 14 days written notice prior to the certificate monthly anniversary shall be given to you before implementing the revised premium.
- **Product withdrawal condition** – we reserve the right to cancel the master policy and the e-certificate as a whole if we decide to discontinue managing this insurance product by giving you and the certificate owner at least 14 days prior written notice. The master policy and the e-certificate, subject to the premium payment, will continue until the next premium due date after the notice period.

- **Pre-existing condition** – means any injury, illness, condition or symptom that existed prior to the initial commencement date or upon reactivation of the coverage, for which:
 - i. treatment, medication, advice or diagnosis has been sought or received;
 - ii. an ordinary and prudent person with such injury, illness, condition or symptom would have sought advice or treatment in connection with his/her health; or
 - iii. you and/or the life assured knew existed, whether or not treatment, medication, advice or diagnosis was sought or received.
- **Tax** – all taxes, including but not limited to any goods and services tax, and/or other forms of sales or consumption tax, whether currently in force or implemented after the date of the certificate will be charged in accordance with the applicable legislation at the prevailing rate. Where necessary, we will amend the terms of the certificate to take into account any such tax.
- **Nomination** – you may nominate a nominee(s) to receive the policy moneys payable. You are encouraged to ensure that your nominee(s) is aware of the insurance plan that you have enrolled.

Note: This list is non-exhaustive. Please refer to the master policy documents for the full list of the terms and conditions under this plan.

6. What are the major exclusions under this plan?

Exclusions on accidental benefit

No benefit shall be payable if the covered accidental event is caused directly or indirectly, wholly or partly, by any one of the following occurrences:

- suicide or self-inflicted injuries, while sane or insane;
- misuse of drugs or alcohol;
- war, violence or terrorism;
- hazardous sports;
- professional sports;
- active duty in military service or law enforcement organisation;
- air travel other than commercial flights;
- exposure from any radiation material from any source;
- any complication resulting from mosquito bites;
- viral, parasitic or bacterial infection;
- pre-existing physical or mental defect; or
- illness, disease, pregnancy, childbirth, food poisoning, hernia, AIDS, ARC or pre-existing conditions.

Additional exclusions for broken bones benefit

- engaging in commando or bomb disposal duties/training, active military duties such as maintenance of civil order, engagement in hostilities, whether war is declared or not, and travel by military aircraft or waterborne vessel;
- injuries as a result of committing, attempting or provoking an assault;
- any injury/fracture/dislocation caused directly or indirectly by a medical condition or its treatment;
- state of unsound mind, mental and personality disorders; or
- any fracture caused by osteoporosis or pathological fracture(s), if osteoporosis or bone disease was diagnosed prior to the initial commencement date.

Note: This list is non-exhaustive. Please refer to the master policy documents for further information on exclusions.

7. Can I cancel my rider(s) coverage?

You may cancel your rider(s) coverage by giving us a written notice and your coverage will end on the next premium due date.

8. What do I need to do if there are changes to my contact details/personal details?

It is important that you inform us of any change in your contact details to ensure that all future correspondences reach you in a timely manner.

9. Where can I get further information?

Should you require additional information about life insurance, please refer to the *insuranceinfo* booklet on 'Life Insurance', available at Sun Life Malaysia or you could log on to the Insurance Info website at www.insuranceinfo.com.my. For further information on claims procedures, please refer to Sun Life Malaysia's website at <https://www.sunlifemalaysia.com/client-care/make-a-claim>.

If you have any enquiries, please contact us at:

Sun Life Malaysia Assurance Berhad
Registration Number: 199001005930 (197499-U)

Level 11, 338 Jalan Tuanku Abdul Rahman, 50100 Kuala Lumpur

Alternatively, you may call the **Client Careline at 1300-88-5055**, lodge an online enquiry via sunlifemalaysia.com, email to us directly at wecare@sunlifemalaysia.com, or fax to us at **(603) 2698 7035**.

10. Other similar types of plan available.

Please call our Client Careline for other similar types of plan available.



Sun Life Malaysia Assurance Berhad
Registration Number: 199001005930 (197499-U)

Level 11, 338 Jalan Tuanku Abdul Rahman, 50100 Kuala Lumpur
Telephone: (603) 2612 3600 wecare@sunlifemalaysia.com
Client Careline: 1300-88-5055 sunlifemalaysia.com

IMPORTANT NOTE:

BUYING LIFE INSURANCE PLAN IS A LONG-TERM FINANCIAL COMMITMENT. YOU MUST CHOOSE THE TYPE OF PLAN THAT BEST SUITS YOUR PERSONAL CIRCUMSTANCES. YOU SHOULD READ AND UNDERSTAND THE INSURANCE POLICY DOCUMENTS OR CONTACT US DIRECTLY FOR MORE INFORMATION.

The information provided in this Product Disclosure Sheet is valid as of June 2019 onwards. This plan is underwritten by Sun Life Malaysia Assurance Berhad <Registration Number: 199001005930 (197499-U)>, an insurer registered with Bank Negara Malaysia under Financial Services Act 2013.

ANNEXURE

Rider conditions – Accidental daily hospital income benefit rider

Note: This rider annexure will be read in conjunction with the summary of certificate and the master policy attached to the GOLIFE basic plan.

1. Definition

1.1 In this rider, the following words and phrases have meanings given next to them:

- a) **Accidental** means a sudden unintentional, unexpected, unusual and specific event caused by violent, external and visible means that occurs at an identifiable time and place which will, independently of any other cause, be the sole cause of bodily injury or resulted in death of the life assured.
- b) **Accidental bodily injury** means bodily injury, occurring whilst this insurance coverage is in force for the life assured due to accidental means.
- c) **Calendar year** means the period of twelve months from January 1 to December 31.
- d) **Doctor** or **physician** or **surgeon** means a registered medical practitioner qualified and licensed to practice western medicine and who, in rendering such treatment, is practicing within the scope of his licensing and training in the geographical area of practice, but excluding a doctor, physician or surgeon who is the life assured himself.
- e) **Hospital** means only an establishment duly constituted and registered as a hospital for the care and treatment of sick and injured person as paying bed-patients, and which:
 - i) has facilities for diagnosis and major surgery;
 - ii) provides 24 hour-a-day nursing services by registered and graduate nurses;
 - iii) is under the supervision of a physician; and
 - iv) is not primarily a clinic; a place for alcoholics or drug addicts; a nursing, rest or convalescent home or a home for the aged or similar establishment.
- f) **Hospitalisation** means admission to a hospital as a registered inpatient for medically necessary treatments for a covered disability upon recommendation of a physician. A patient will not be considered as an inpatient if the patient does not physically stay in the hospital for the whole period of confinement.
- g) **Initial commencement date** means the first e-certificate commencement date as stated in the certificate of insurance.
- h) **Inpatient** means the life assured is admitted overnight into a hospital in order to receive treatment.
- i) **Medically necessary** means a medical service which is:

- i) consistent with the diagnosis and customary medical treatment for a covered disability;
 - ii) in accordance with standards of good medical practice, consistent with current standard of professional medical care, and of proven medical benefits;
 - iii) not for the convenience of the life assured or the doctor, and unable to be reasonably rendered out of hospital (if admitted as an inpatient);
 - iv) not of an experimental, investigational or research nature, preventive or screening nature; and
 - v) for which the charges are fair and reasonable and customary for the disability.
- j) **Pre-existing condition** means:
- Any injury, illness, condition or symptom that existed prior to the initial commencement date or upon reactivation of the coverage, for which:
- i) treatment, medication, advice or diagnosis has been sought or received;
 - ii) an ordinary and prudent person with such injury, illness, condition or symptom would have sought advice or treatment in connection with his/her health; or
 - iii) the certificate owner and/or the life assured knew existed, whether or not treatment, medication, advice or diagnosis was sought or received.
- k) **Reactivation of coverage** means the coverage is reactivated after it has been discontinued for one month or more than one month. The coverage will continue upon successful premium deduction.

2. Application of rider

- 2.1 This rider applies only if it is stated and included in the certificate of insurance.

3. Description of benefit

- 3.1 Depending on the general conditions and while the rider is in force, should we receive satisfactory proof of the life assured's hospitalisation (as defined) directly arising from accidental bodily injury and upon the approval of claim, we will pay the benefit amount according to the sum assured as per the selected plan or any subsequent endorsement issued thereof.
- 3.2 We will deduct any amount the certificate owner owes us.
- 3.3 This benefit shall be payable provided:
- a) the minimum admission period for hospital confinement is 6 hours;
 - b) the hospitalisation occurred within 180 days from the date of the accident; and

- c) the hospitalisation is medically necessary.
- 3.4 The benefit is payable up to a maximum of 60 days of hospitalisation per calendar year.
- 3.5 Per day of hospitalisation shall be based on the charging day adopted by the registered hospital concerned. If a life assured is admitted to two or more hospitals in a calendar day, we, upon approval, shall pay only one daily hospital income benefit for each calendar day of hospitalisation.
- 3.6 Coverage includes any private or government hospital, general wards and special care unit.
- 3.7 The benefit is non-cumulative. However, the benefit paid will be reinstated at each calendar year, subject to the terms and conditions of the master policy.

4. Exclusions

- 4.1 The benefit will not be applicable or payable if the covered accidental event resulted directly or indirectly, wholly or partly, by any of the following occurrence:
 - a) Suicide, attempted suicide or self-inflicted injury/harm irrespective of the life assured's mental state, willful or negligent exposure to unnecessary risks or perils;
 - b) While or because the life assured is under the influence of alcohol, narcotic and/or drug or participating in any criminal act or brawl;
 - c) Direct or indirect involvement in, or as a victim of, any kind of war, violence, terrorism, any illegal activities or mutiny or popular rising, military insurrection, rebellion, conspiracy, military or usurped power, martial law or state of siege, or any of the events or causes which determine the proclamation or maintenance of martial law or state of siege; and any act of any person acting on behalf of or in connection with any organisation with activities directed towards the overthrow by force or any de jure or de facto government;
 - d) Travel in any aircraft, except as a fare-paying passenger in a regular scheduled commercial aircraft;
 - e) Engaging in hazardous sport(s) (including but not limited to winter sports, ice hockey, horse riding, polo playing, canoeing, sailing or windsurfing, mountaineering, rock climbing, caving, potholing, hunting, hang gliding, sky diving, parachuting, scuba diving, boxing, wrestling, martial arts activities), unless such activities are engaged on a recreation basis with a licensed organization;
 - f) While engaging in professional sport activities of any kind;
 - g) Active duty in any navy, army, air force, military, fire service, civil defence, police or law enforcement organisation;
 - h) Exposure from any radiation material from any source;
 - i) Hernia, illness, disease, pregnancy, childbirth, miscarriage or food poisoning, Acquired Immuno-deficiency Syndrome (AIDS) or AIDS Related Complex (ARC), pre-existing physical problem or condition and its direct or indirect complications;

- j) Any complication resulting from mosquito bites;
- k) Any viral, parasitic or bacterial infection including food poisoning; or
- l) Any pre-existing physical or mental defect or infirmity;

5. Claim procedure

- 5.1 The certificate owner or his/her legal representative shall give us written notice of his/her intention to claim for the benefit within 30 days from the date the covered event happens.
- 5.2 Satisfactory proof of claim must be given to us before we consider this claim at the expense of certificate owner or his/her legal representative.

6. Ending the benefit

- 6.1 This benefit will end at the earliest of any of the following circumstances:
 - a) Upon cancellation of this rider;
 - b) On this rider's benefit end date as shown in the certificate of insurance;
 - c) Upon death of the life assured and payment of the death benefit;
 - d) Upon payment of the TPD benefit of the life assured where the TPD benefit is equal to the death benefit;
 - e) Upon non-payment of premium;
 - f) Upon surrender of the certificate;
 - g) Upon cancellation of the certificate;
 - h) Upon termination of the telecommunication services with the master policy holder;
or
 - i) On the certificate monthly anniversary immediately after the life assured's 50th birthday.

ANNEXURE

Rider conditions – Broken bones benefit rider

Note: This rider annexure will be read in conjunction with the summary of certificate and the master policy attached to the GOLIFE basic plan.

1. Definition

1.1 In this rider, the following words and phrases have meanings given next to them:

- a) **Accidental** means a sudden unintentional, unexpected, unusual and specific event caused by violent, external and visible means that occurs at an identifiable time and place which will, independently of any other cause, be the sole cause of bodily injury or resulted in death of the life assured.
- b) **Calendar year** means the period of twelve months from January 1 to December 31.
- c) **Dislocation** means a complete or incomplete displacement of the bones that form a joint that requires replacement by a doctor/surgeon.
- d) **Doctor** or **physician** or **surgeon** means a registered medical practitioner qualified and licensed to practice western medicine and who, in rendering such treatment, is practicing within the scope of his licensing and training in the geographical area of practice, but excluding a doctor, physician or surgeon who is the life assured himself.
- e) **Fracture** means a complete or incomplete break in the continuity of bone.
- f) **Initial commencement date** means the first e-certificate commencement date as stated in the certificate of insurance.
- g) **Injury** means bodily injured caused solely by accident.
- h) **Pre-existing condition** means:

Any injury, illness, condition or symptom that existed prior to the initial commencement date or upon reactivation of the coverage, for which:

- i) treatment, medication, advice or diagnosis has been sought or received;
 - ii) an ordinary and prudent person with such injury, illness, condition or symptom would have sought advice or treatment in connection with his/her health; or
 - iii) the certificate owner and/or the life assured knew existed, whether or not treatment, medication, advice or diagnosis was sought or received.
- i) **Reactivation of coverage** means the coverage is reactivated after it has been discontinued for one month or more than one month. The coverage will continue upon successful premium deduction.

2. Application of rider

2.1 This rider applies only if it is stated and included in the certificate of insurance.

3. Description of benefit

3.1 Depending on the general conditions and while the rider is in force, should we receive satisfactory proof that the life assured sustains injury due to accidental causes which results in bone fracture/dislocation and upon the approval of claim, we will pay the benefit amount according to the sum assured as per the selected plan or any subsequent endorsement issued thereof.

3.2 We will deduct any amount the certificate owner owes us.

3.3 This benefit shall be payable provided the injury(ies) of the life assured occurs due to accident and within 180 days from the date of the accident.

3.4 The coverage for this benefit is only applicable to the following fractures/dislocation:

- a) spinal vertebrae fracture;
- b) hip fracture;
- c) skull fracture;
- d) fracture within the thigh, lower leg, upper arm or forearm;
- e) other fracture (including wrist, hand and foot but excluding fingers, thumbs, toes, kneecaps); and
- f) dislocation of the shoulder, elbow, wrist, hip, knee or ankle.

3.5 The benefit is non-cumulative and will only be payable once every calendar year for not more than one claim per accidental event.

3.6 The benefit paid will be reinstated at each calendar year, subject to the terms and conditions of the master policy.

4. Exclusions

4.1 The benefit will not be applicable or payable if the covered accidental event resulted directly or indirectly, wholly or partly, by any of the following occurrence:

- a) Suicide, attempted suicide or self-inflicted injury/harm irrespective of the life assured's mental state, willful or negligent exposure to unnecessary risks or perils;
- b) While or because the life assured is under the influence of alcohol, narcotic and/or drug or participating in any criminal act or brawl;
- c) Direct or indirect involvement in, or as a victim of, any kind of war, violence, terrorism, any illegal activities or mutiny or popular rising, military insurrection, rebellion, conspiracy, military or usurped power, martial law or state of siege, or any of the events or causes which determine the proclamation or maintenance of martial

law or state of siege; and any act of any person acting on behalf of or in connection with any organisation with activities directed towards the overthrow by force or any de jure or de facto government;

- d) Travel in any aircraft, except as a fare-paying passenger in a regular scheduled commercial aircraft;
- e) Engaging in hazardous sport(s) (including but not limited to winter sports, ice hockey, horse riding, polo playing, canoeing, sailing or windsurfing, mountaineering, rock climbing, caving, potholing, hunting, hang gliding, sky diving, parachuting, scuba diving, boxing, wrestling, martial arts activities), unless such activities are engaged on a recreation basis with a licensed organization;
- f) While engaging in professional sport activities of any kind;
- g) Active duty in any navy, army, air force, military, fire service, civil defence, police or law enforcement organisation;
- h) Exposure from any radiation material from any source;
- i) Hernia, illness, disease, pregnancy, childbirth, miscarriage or food poisoning, Acquired Immuno-deficiency Syndrome (AIDS) or AIDS Related Complex (ARC), pre-existing physical problem or condition and its direct or indirect complications;
- j) Any complication resulting from mosquito bites;
- k) Any viral, parasitic or bacterial infection including food poisoning;
- l) Any pre-existing physical or mental defect or infirmity;
- m) Engaging in commando or bomb disposal duties/training, active military duties such as maintenance of civil order, engagement in hostilities, whether war is declared or not, and travel by military aircraft or waterborne vessel. This exclusion overrides all other terms and conditions relating to military services;
- n) Injuries as a result of committing, attempting or provoking an assault;
- o) Any injury/fracture/dislocation caused directly or indirectly by a medical condition or its treatment;
- p) State of unsound mind, mental and personality disorders; or
- q) Any fracture caused by osteoporosis or pathological fracture(s), if osteoporosis or bone disease was diagnosed prior to the initial commencement date or upon reactivation of the coverage.

5. Claim procedure

- 5.1 The certificate owner or his/her legal representative shall give us written notice of his/her intention to claim for the benefit within 30 days from the date the covered event happens.
- 5.2 Satisfactory proof of claim must be given to us before we consider this claim at the expense of certificate owner or his/her legal representative.

6. Ending the benefit

6.1 This benefit will end at the earliest of any of the following circumstances:

- a) Upon cancellation of this rider;
- b) On this rider's benefit end date as shown in the certificate of insurance;
- c) Upon death of the life assured and payment of the death benefit;
- d) Upon payment of the TPD benefit of the life assured where the TPD benefit is equal to the death benefit;
- e) Upon non-payment of premium;
- f) Upon surrender of the certificate;
- g) Upon cancellation of the certificate;
- h) Upon termination of the telecommunication services with the master policy holder;
or
- i) On the certificate monthly anniversary immediately after the life assured's 50th birthday.

ANNEXURE

Rider conditions – Accident & emergency recovery benefit rider

Note: This rider annexure will be read in conjunction with the summary of certificate and the master policy attached to the GOLIFE basic plan.

1. Definition

1.1 In this rider, the following words and phrases have meanings given next to them:

- a) **Accidental** means a sudden unintentional, unexpected, unusual and specific event caused by violent, external and visible means that occurs at an identifiable time and place which will, independently of any other cause, be the sole cause of bodily injury or resulted in death of the life assured.
- b) **Calendar year** means the period of twelve months from January 1 to December 31.
- c) **Doctor** or **physician** or **surgeon** means a registered medical practitioner qualified and licensed to practice western medicine and who, in rendering such treatment, is practicing within the scope of his licensing and training in the geographical area of practice, but excluding a doctor, physician or surgeon who is the life assured himself.
- d) **Hospital** means only an establishment duly constituted and registered as a hospital for the care and treatment of sick and injured person as paying bed-patients, and which:
 - i) has facilities for diagnosis and major surgery;
 - ii) provides 24 hour-a-day nursing services by registered and graduate nurses;
 - iii) is under the supervision of a physician; and
 - iv) is not primarily a clinic; a place for alcoholics or drug addicts; a nursing, rest or convalescent home or a home for the aged or similar establishment.
- e) **Initial commencement date** means the first e-certificate commencement date as stated in the certificate of insurance.
- f) **Inpatient** means the life assured is admitted overnight into a hospital in order to receive treatment.
- g) **Outpatient** means the life assured is receiving medical care or treatment without being hospitalised and includes treatment in a daycare centre.
- h) **Pre-existing condition** means:

Any injury, illness, condition or symptom that existed prior to the initial commencement date or upon reactivation of the coverage, for which:

 - i) treatment, medication, advice or diagnosis has been sought or received;

- ii) an ordinary and prudent person with such injury, illness, condition or symptom would have sought advice or treatment in connection with his/her health; or
 - iii) the certificate owner and/or the life assured knew existed, whether or not treatment, medication, advice or diagnosis was sought or received.
- i) **Reactivation of coverage** means the coverage is reactivated after it has been discontinued for one month or more than one month. The coverage will continue upon successful premium deduction.

2. Application of rider

- 2.1 This rider applies only if it is stated and included in the certificate of insurance.

3. Description of benefit

- 3.1 Depending on the general conditions and while the rider is in force, should we receive satisfactory proof of the life assured required emergency outpatient or inpatient treatment in the Accident and Emergency (A&E) department of a registered hospital in Malaysia due to accidental causes and upon the approval of claim, we will pay the benefit amount according to the sum assured as per the selected plan or any subsequent endorsement issued thereof.
- 3.2 We will deduct any amount the certificate owner owes us.
- 3.3 This benefit shall be payable provided the treatment is received within 24 hours of the accident.
- 3.4 The benefit is non-cumulative and will only be payable twice every calendar year.
- 3.5 The benefit paid will be reinstated at each calendar year, subject to the terms and conditions of the master policy.

4. Exclusions

- 4.1 The benefit will not be applicable or payable if the covered accidental event resulted directly or indirectly, wholly or partly, by any of the following occurrence:
- a) Suicide, attempted suicide or self-inflicted injury/harm irrespective of the life assured's mental state, willful or negligent exposure to unnecessary risks or perils;
 - b) While or because the life assured is under the influence of alcohol, narcotic and/or drug or participating in any criminal act or brawl;
 - c) Direct or indirect involvement in, or as a victim of, any kind of war, violence, terrorism, any illegal activities or mutiny or popular rising, military insurrection, rebellion, conspiracy, military or usurped power, martial law or state of siege, or any of the events or causes which determine the proclamation or maintenance of martial law or state of siege; and any act of any person acting on behalf of or in connection with any organisation with activities directed towards the overthrow by force or any de jure or de facto government;

- d) Travel in any aircraft, except as a fare-paying passenger in a regular scheduled commercial aircraft;
- e) Engaging in hazardous sport(s) (including but not limited to winter sports, ice hockey, horse riding, polo playing, canoeing, sailing or windsurfing, mountaineering, rock climbing, caving, potholing, hunting, hang gliding, sky diving, parachuting, scuba diving, boxing, wrestling, martial arts activities), unless such activities are engaged on a recreation basis with a licensed organization;
- f) While engaging in professional sport activities of any kind;
- g) Active duty in any navy, army, air force, military, fire service, civil defence, police or law enforcement organisation;
- h) Exposure from any radiation material from any source;
- i) Hernia, illness, disease, pregnancy, childbirth, miscarriage or food poisoning, Acquired Immuno-deficiency Syndrome (AIDS) or AIDS Related Complex (ARC), pre-existing physical problem or condition and its direct or indirect complications;
- j) Any complication resulting from mosquito bites;
- k) Any viral, parasitic or bacterial infection including food poisoning; or
- l) Any pre-existing physical or mental defect or infirmity.

5. Claim procedure

- 5.1 The certificate owner or his/her legal representative shall give us written notice of his/her intention to claim for the benefit within 30 days from the date the covered event happens.
- 5.2 Satisfactory proof of claim must be given to us before we consider this claim at the expense of certificate owner or his/her legal representative.
- 5.3 Claims evidences should include but not limited to claims form completed by the doctor (as defined) from the Accident & Emergency Department of the Hospital answering the following information:
 - Details of injuries
 - Description of the accidental event

6. Ending the benefit

- 6.1 This benefit will end at the earliest of any of the following circumstances:
 - a) Upon cancellation of this rider;
 - b) On this rider's benefit end date as shown in the certificate of insurance;
 - c) Upon death of the life assured and payment of the death benefit;

- d) Upon payment of the TPD benefit of the life assured where the TPD benefit is equal to the death benefit;
- e) Upon non-payment of premium;
- f) Upon surrender of the certificate;
- g) Upon cancellation of the certificate;
- h) Upon termination of the telecommunication services with the master policy holder;
or
- i) On the certificate monthly anniversary immediately after the life assured's 50th birthday.