Coverage Types: Travel Benefits and Personal Liability

Master Agreement Year: May 1, 2019 through April 30, 2020 (For the 2019/2020 School Year). No Insured person may have a policy period longer than twelve (12) months.

ELIGIBILITY: Class 1: Students, Faculty, Scholars, or other persons with a current passport or student visa, who are temporarily residing outside their Home Country or regular residence. The Insured must be engaged in full-time educational or research activities of the Sponsoring Organization outside the United States.

WHEN YOUR COVERAGE BEGINS - All coverage will take effect at 12:01 A.M. local time, at the location of the Insured, on the Scheduled Departure Date provided:
(a) coverage has been elected; and
(b) the required premium has been paid.

All coverage will take effect at 12:01 A.M. local time, at the location of the Insured, on the later of the Scheduled Departure Date, or upon Your departure from Your Home Country.

WHEN YOUR COVERAGE ENDS – Your coverage will end at 11:59 local time on the date that is the earliest of the following:
(a) upon Your return to Your Home Country;
(b) three hundred sixty-five (365) days after the Effective Date;

In no event will coverage be extended for unscheduled extensions to Your Trip for which premium has not been paid in advance.

Travel Benefits:

SCHEDULE OF BENEFITS:

<table>
<thead>
<tr>
<th>Coverage Type</th>
<th>Maximum Benefits</th>
</tr>
</thead>
<tbody>
<tr>
<td>Baggage/Personal Effects</td>
<td>$3,000, max. benefit per article $500; combined max. $1,000 for jewelry, furs, watches, personal computers, cameras</td>
</tr>
<tr>
<td>Trip Interruption – Air Only</td>
<td>Up to $2,000</td>
</tr>
</tbody>
</table>

DESCRIPTION OF BENEFITS

Baggage/Personal Effects
The Company will reimburse the Insured up to the maximum shown on the Schedule, for loss, theft or damage to baggage and personal effects, provided the Insured has taken all reasonable measures to protect, save and/or recover his/her property at all times. The baggage and personal effects must be owned by and accompany the Insured during the Covered Trip.

This coverage is secondary to any coverage provided by a Common Carrier and all other valid and collectible insurance indemnity and shall apply only when such other benefits are exhausted.

There will be a per article limit shown on the Schedule.

There will be a combined maximum limit shown on the Schedule for the following: jewelry; watches; articles consisting in whole or in part of silver, gold or platinum; furs; articles trimmed with or made mostly of fur; personal computers, cameras and their accessories and related equipment.

The Company will pay the lesser of the following: Actual Cash Value at time of loss, theft or damage to baggage and personal effects, less depreciation as determined by the Company; or the cost of repair or replacement.
Extension of Coverage
If an Insured has checked his/her property with a Common Carrier and delivery is delayed, coverage for Baggage/Personal Effects will be extended until the Common Carrier delivers the property.

Trip Interruption
The Company will pay a benefit, up to the maximum shown on the Schedule, if the Insured must return to their Home Country due to life-threatening Sickness, Accidental Injury or death of a Family Member in which their the Family Member's condition became life-threatening after the Insured departed on their Trip.

The Company will pay for the following: airfare paid less the value of applied credit from an unused return travel ticket if available, to return You home (limited to the cost of a round-trip economy airfare) by scheduled carrier.

In no event shall the amount reimbursed exceed the maximum benefit shown on the Schedule of Coverages.

PLAN DEFINITIONS
Accident means a sudden, unexpected, unusual, specific event that occurs at an identifiable time and place, but shall also include exposure resulting from a mishap to a conveyance in which You are traveling.

Accidental Injury means Bodily Injury caused by an Accident (of external origin) being the direct and independent cause in the loss.

Actual Cash Value means purchase price less depreciation.

Additional Expense means any reasonable expenses for meals and lodging which were necessarily incurred as the result of a Hazard and which were not provided by the Common Carrier or other party free of charge.

Bodily Injury means identifiable physical injury which: (a) is caused by an Accident, and (b) solely and independently of any other cause, except illness resulting from, or medical or surgical treatment rendered necessary by such injury, is the direct cause of Your death or dismemberment within twelve months from the date of the Accident.

Checked Baggage means a piece of baggage for which a claim check has been issued to You by a Common Carrier.

Common Carrier means any land, sea, and/or air conveyance operating under a valid license for the transportation of passengers for hire.

Covered Trip means any class of scheduled trips, tours or cruises You request coverage and remit the required premium.

Effective Date means the date and time Your coverage begins, as outlined in the General Provisions section of this Certificate.


Home Country means the country where You have Your true, fixed and permanent home and principal establishment.

Individual Coverage Term means the period of time beginning when You have been enrolled for coverage under this Policy and for whom the required premium has been paid.

Insurance means any one of the following types of policies or plans which provide benefits for hospital confinement medical expenses for You on Your effective date of coverage, and such policy or plan requires You to pay a deductible and/or portion of coinsurance: individual, group or blanket insurance plans; group Blue Cross, Blue Shield, or other group prepayment coverage plans; coverage under labor management trustee plans, union welfare plans, employer organization plans, employee benefit organizational plans, or other arrangements of benefits for persons of a group. Insurance does not include Medicare or Medicaid.

Insured means the person who has enrolled for and paid for coverage under the Policy.
**Loss** means injury or damage sustained by You in consequence of happening of one or more of the occurrences against which the Company has undertaken to indemnify You.

**Physician** means a licensed practitioner of medical, surgical or dental services acting within the scope of his/her license. The treating Physician may not be You, a Traveling Companion or a Family Member.

**Policyholder** means the Policyholder shown on the face page of this Policy.

**Scheduled Departure Date** means the date on which You are originally scheduled to leave on the Trip.

**Scheduled Return Date** means the date on which You are originally scheduled to return to the point of origin or to a different final destination.

**Sickness** means an illness or disease which is diagnosed or treated by a Physician after the effective date of insurance and while You are covered under the Policy.

**Trip** means any trip outside Your Home Country not to exceed 365 days.

**You or Your** refers to all persons listed on the Confirmation of Coverage under the program purchased by the Insured.

**The following exclusions apply to Baggage/Personal Effects:**

The Company will not provide benefits for any loss or damage to:

1. animals;
2. automobiles and automobile equipment;
3. boats or other vehicles or conveyances;
4. trailers;
5. motors;
6. motorcycles;
7. aircraft;
8. bicycles (except when checked as baggage with a Common Carrier);
9. household effects and furnishing;
10. antiques and collector’s items;
11. eye glasses, sunglasses or contact lenses;
12. artificial teeth and dental bridges;
13. hearing aids;
14. prosthetic limbs;
15. prescribed medications;
16. keys, money, stamps, securities and documents;
17. tickets;
18. credit cards;
19. professional or occupational equipment or property, whether or not electronic business equipment;
20. telephones, computer hardware or software;
21. sporting equipment if loss or damage results from the use thereof.

Any loss caused by or resulting from the following is excluded:

1. breakage of brittle or fragile articles;
2. wear and tear or gradual deterioration;
3. insects or vermin;
4. inherent vice or damage while the article is actually being worked upon or processed;
5. confiscation or expropriation by order of any government;
6. radioactive contamination;
7. war or any act of war whether declared or not;
8. theft or pilferage while left unattended in any vehicle;
9. mysterious disappearance;
10. property illegally acquired, kept, stored or transported;
11. insurrection or rebellion;
12. imprudent action or omission;
13. property shipped as freight or shipped prior to the Scheduled Departure Date.
**Personal Liability**

**SCHEDULE OF BENEFITS:**

<table>
<thead>
<tr>
<th>All Coverages and Benefits are in U.S. Dollar Amounts</th>
<th>$200,000</th>
</tr>
</thead>
<tbody>
<tr>
<td>Personal Liability – Per Occurrence</td>
<td>$200,000</td>
</tr>
<tr>
<td>Deductible Per Claim:</td>
<td>$100</td>
</tr>
<tr>
<td>Aggregate Limit per INSURED:</td>
<td>$200,000</td>
</tr>
<tr>
<td>Medical Payments Coverage:</td>
<td>$25,000</td>
</tr>
<tr>
<td>Additional Living Expenses Coverage:</td>
<td>$10,000</td>
</tr>
<tr>
<td>Payment of Deductible Under Homeowner’s Insurance Coverage</td>
<td>$1,000</td>
</tr>
</tbody>
</table>

**DEFINITIONS**

“AUTOMOBILE” means a land motor vehicle, trailer or semi-trailer designed for travel on public roads (including any machinery or apparatus attached thereto)

“BODILY INJURY” means bodily injury, sickness or disease sustained by any person, including death. It does not include any communicable disease.

“CLAIM(S)” means a demand for money or the service of a suit naming an INSURED and alleging an INCIDENT. CLAIMS does not include proceedings seeking injunctive or other non-pecuniary relief.

“CLAIMS EXPENSES” means:

(a) Fees charged by an attorney or attorneys designated by the Company and all other fees, costs, and expenses resulting from the investigation, adjustment, defense settlement and appeal of a CLAIM, suit or proceeding arising in connection therewith, if incurred by the Company, or incurred by the INSURED with written consent of the Company, but does not include salary charges or expenses of regular employees or officials of the Company, or fees and expenses of independent adjusters;

(b) All costs against the INSURED in such suits and all interest on the entire amount of any judgment therein which accrues after entry of the judgment and before the Company has paid or tendered or deposited, whether in court or otherwise, that part of the judgment which does not exceed the limit of the Company’s liability thereon;

(c) Premiums on appeal bonds and premiums on bonds to release attachments in such suits, but not for bond amounts in excess of the applicable limit of liability of this policy. The Company shall have no obligation to pay for or furnish any bond;

(d) Up to $250 for loss of earnings to each INSURED for each day or part of a day of their attendance at the Company’s request at a trial, hearing or arbitration proceeding involving a civil suit against such INSURED for covered DAMAGES, but the amount so payable for any one or series of trials, hearings or arbitration proceedings arising out of the same INCIDENTS shall in no event exceed $5,000.

“DAMAGES” means compensatory judgments, settlement or awards, but does not include fines or penalties, the return of fees or other consideration paid to the INSURED.

“HOST FAMILY” means the person(s) responsible for providing the INSURED’S room, board, general welfare, and care while on a Covered Trip/Program.

“INCIDENT” means any act or omission committed by the INSURED during the Policy Term which unexpectedly, unintentionally, and suddenly results in BODILY INJURY, PROPERTY DAMAGE or PERSONAL INJURY provided the act or omission committed by the INSURED was during the POLICY TERM.

“INSURED LOCATION” means (1) the HOST FAMILY’S residence premises and the part of any other premises, structures and grounds used by the Insured; or (2) Any part of a premises where an Insured is temporarily staying. An INSURED LOCATION does not include coverage for PROPERTY DAMAGE to property rented to, occupied by, used by, or in the care of any INSURED, to the extent that the INSURED is required by contract to provide insurance.
“MOBILE EQUIPMENT” means a land vehicle (including any machine or apparatus attached thereto, whether or not self-propelled), (1) not subject to motor vehicle registration, or (2) maintained for use exclusively on premises owned by or rented to any INSURED, including the ways immediately adjoining, or (3) designed for use principally off public roads, or (4) designed or maintained for the sole purpose of affording mobility to equipment of the following types forming an integral part of or permanently attached to such vehicle: power cranes, shovels, loaders, diggers and drills; concrete mixers (other than the mix-in-transit type); graders, scrappers, rollers and other construction or repair equipment; air compressors, pumps and generators, including spraying, welding and building cleaning equipment; and geophysical exploration and well servicing equipment, or (5) anything with a motor that rolls, flies or dives, such as snowmobiles, mopeds, motorbikes, dirt bikes or (6) anything that flies such as parasails, parachutes and hang gliders.

“PERSONAL INJURY” means:
(a) false arrest, detention or imprisonment, wrongful entry or eviction, other invasion of private occupancy, or malicious prosecution; or
(b) the publication or utterance of a libel, slander or other defamatory or disparaging material; or
(c) a publication or an utterance in violation of an individual’s right of privacy; or
(d) shock, mental anguish, or mental injury.

PERSONAL INJURY does not include the transmission intentionally or unintentionally of any illness, sickness or disease by the INSURED to anyone, or any consequence resulting from that illness, sickness or disease.

“PROPERTY DAMAGE” means:
(a) physical injury to or destruction of tangible property, including the loss of use thereof at any time resulting therefrom; or
(b) loss of use, or loss of the value of tangible property which has not been physically injured or destroyed.

**Personal Liability Insurance Coverage**
The Company will pay on behalf of the INSURED all sums which the INSURED shall become legally obligated to pay as DAMAGES for personal liability CLAIMS first made against the INSURED and reported to the Company, during the Policy Term that his endorsement is in effect, arising out of any INCIDENT covered under this Policy, provided always that such INCIDENT happens:
(a) on or after the Policy Effective Date on which this endorsement becomes effective; or
(b) on or after the effective date of the earliest claims-made policy issued by the Company covering the INSURED to which this is a continuous renewal.

For any claim brought in the United States of America (including its territories and possessions), Puerto Rico or Canada, the Company shall have the right and duty to defend any suit against the INSURED seeking DAMAGES to which this insurance applies even if any of the allegations of the suit are groundless, false or fraudulent. The Company may make such investigation and settlement of any CLAIM, or suit as it deems expedient. With respect to claims brought or suits instituted in courts elsewhere than within the United States of America (including its territories and possessions), Puerto Rico or Canada, the Company shall have the right, but not the duty, to:
1) Defend any suit; and
2) Make such investigation, negotiation and settlement of any claim or suit as the Company deems expedient.

Any claim or suit which the Company elects not to investigate, settle or defend, the INSURED, under the Company’s supervision, will make or cause to be made, such investigation and defense as may be reasonably necessary. Subject to prior authorization by the Company, the INSURED will effect, to the extent possible, such settlements as the Company and the INSURED deem prudent. The Company will reimburse the Insured for the cost of any such investigation, settlement or defense, in the currency of the United States of America at the rate of exchange prevailing on the date of payment.

In no event shall the Company be obligated to pay DAMAGES or CLAIM EXPENSES or to defend, or continue to defend, any suit after the applicable limit of the Company’s liability has been exhausted by payment of DAMAGES and/or CLAIM EXPENSES.

**OTHER INSURANCE** If other valid and collectible insurance is available to the Insured for a covered loss under Coverage A, Personal Liability Insurance Coverage, the Company’s obligations are limited as follows:
(a) Primary Insurance:
This insurance is primary over the POLICYHOLDER’S liability insurance. If this insurance is primary, our obligations are not affected unless any insurance other than the POLICYHOLDER’S insurance is also primary. Then we will share with all that other insurance by the Method of Sharing described in (b) below.

(b) Method of Sharing:
If the other insurance permits the contribution by equal shares, we will follow this method also. Under this approach, each insurer contributes equal amounts until it has paid its applicable limit of insurance or none of the loss remains, whichever comes first.

The Policy provides excess coverage over and above insurance which may cover the Insured, Host Family or a third party involved in an Occurrence. The amount paid is pursuant to the applicable coverage provision(s) of the Policy and is reduced by the amount payable by any such Underlying Insurance.

**Medical Payments Coverage**
The Company will pay up to $25,000 on behalf of the INSURED for Medical Expenses that are incurred or medically ascertained within 52 weeks after the date of the INCIDENT and which result from an INCIDENT causing BODILY INJURY to:

(a) A person who is on the INSURED LOCATION with the permission of the HOST FAMILY, if the INCIDENT is caused by the activities of the INSURED or by an animal owned by, or in the care of, an INSURED.

(b) A person not on the INSURED LOCATION, if the INCIDENT is caused by the activities of an INSURED or by an animal owned by, or in the care of, an INSURED.

Medical Expenses are defined as those expenses recommended and approved by a Physician for hospital room and board, use of an operating room, emergency room, ambulatory medical center, fees of physicians and nurses, laboratory tests, prescription medicines or drugs, anesthetics, transfusions, diagnostic testing, and therapeutics.

The Company will pay the benefit pursuant to this provision only after due proof of the Medical Expenses incurred has been submitted to the Company.

This coverage does not apply to the INSURED or to a dependent of an INSURED.

**Additional Living Expenses Coverage**
If an INCIDENT caused by the activities of the INSURED results in the INSURED LOCATION becoming unfit to live in, the Company will pay for any necessary increase in living expenses incurred by the HOST FAMILY so that the household can maintain its normal standard of living. Payment will be for the shortest time required to repair or replace the damage to the INSURED LOCATION or, if the HOST FAMILY permanently relocates, the shortest time required for the HOST FAMILY to settle elsewhere. The Company will pay the HOST FAMILY benefits up to a maximum of $10,000 on behalf of the INSURED per POLICY TERM for Additional Living Expenses.

Payment. The Company will pay the benefit pursuant to this provision only after due proof of the additional living expenses incurred has been submitted to the Company.

**Payment of Deductible Under Homeowner’s Insurance Coverage**
If an INCIDENT caused by the activities of the INSURED results in a claim being paid under a valid and collectible homeowner’s insurance policy of the HOST FAMILY covering the INSURED LOCATION, the Company will pay the HOST FAMILY for the loss incurred up to the amount of the deductible under the HOST FAMILY’S homeowner’s insurance policy, not to exceed $1,000 per INSURED per POLICY TERM.

Payment. The Company will pay the benefit pursuant to this provision only after due proof of the deductible amount which was incurred has been submitted to the Company.

**LIMIT OF LIABILITY – CLAIMS**
Regardless of the number of INSUREDS under this Policy, the number of persons or organizations which sustain injury, or the number of CLAIMS made or suits brought, the Company’s liability for the Coverages provided is stated in the Schedule of Benefits.

Notwithstanding the limit of liability identified in the Schedule of Benefits, a sub-limit of $25,000 each claim and aggregate, as part of and not in addition to the limit of liability identified in the Schedule for Benefits, shall constitute the only limit of liability available for all damages and claims expenses arising out of or attributable to any suit brought against any INSURED alleging, in whole or part sexual assault, abuse, molestation or habitual neglect, or licentious,
immoral, amoral, other behavior that was threatened, committed or alleged to have been committed, by an INSURED or by any person for whom the INSURED is legally responsible. This sub-limit is inclusive of all expenses derived from or based upon the defense of any above described act. This sub-limit of liability shall constitute the only limit of liability available for all damages and claim expenses arising from the above described acts and no other limit of liability shall be available for any damages or claim expenses arising from the above described acts.

The limit of liability stated in the Schedule of Benefits as applicable to “each claim” is the limit of the Company’s liability for all DAMAGES because of each CLAIM covered hereby. All CLAIMS arising from the same or related INCIDENT shall be considered a single CLAIM for the purpose of this insurance and shall be subject to the same limit of liability. The limit of liability stated in the Schedule of Benefits as “AGGREGATE” is, subject to the above provision respecting “each claim”, the total limit of the Company’s liability under this Policy for all DAMAGES as a result of all CLAIMS made and reported to the Company during the POLICY TERM, including any Extended Reporting Period. CLAIMS EXPENSES are included within the applicable limit of liability stated in the Schedule of Benefits.

WHEN CLAIM IS TO BE CONSIDERED AS FIRST MADE
(a) When the Company first receives written notice from the INSURED, that a CLAIM has been made, or
(b) When the Company first receives written notice from the INSURED, of specific circumstances involving a particular person or entity which may result in a CLAIM.

All CLAIMS arising out of the same or related INCIDENT shall be considered as having been made at the time the first such CLAIM is made, and shall be subject to the same limit of liability.

LIABILITY GENERAL PROVISIONS

ACTION AGAINST THE COMPANY. No action shall lie against the Company unless, as a condition precedent thereto, there shall have been full compliance with all of the terms of this policy, but not until the amount of the INSURED’s obligation to pay shall have been finally determined either by judgment against the INSURED after actual trial or by written agreement of the INSURED, the claimant and the Company.

ASSIGNMENT. The interest of any INSURED is not assignable. If any INSURED shall die or be judged incompetent, this insurance shall thereupon terminate for such person but shall cover the INSURED’s legal representative as the INSURED with respect to liability previously incurred and covered by this insurance.

ASSISTANCE AND COOPERATION OF INSURED IN THE EVENT OF CLAIM OR SUIT. Upon the INSURED becoming aware of any INCIDENT which could reasonably be expected to be the basis of a CLAIM covered hereby, written notice shall be given by the INSURED to the Company together with the fullest information obtainable. If CLAIM is made or suit is brought against the INSURED, the INSURED shall immediately forward to the Company every demand, notice, summons or other process received by the INSURED or the INSURED’s representative. The INSURED shall cooperate with the Company and, upon the Company’s request, assist in making settlements in the conduct of suits and in enforcing any right of contribution or indemnity against any person or organization who may be liable to the INSURED because of DAMAGES with respect to which this insurance applies. The INSURED shall attend hearings and trials and assist in securing and giving evidence and obtaining the attendance of witnesses. The INSURED shall not, except at the INSURED’s own cost, voluntarily make any payments, assume any obligation or incur any expense.

CURRENCY. All premiums must be paid to the Company, and the Company will pay all benefits, in the currency of the United States of America at the rate of exchange prevailing on the date of payment.

POLICY TERM. With respect to each INSURED, the POLICY TERM shall begin WHEN AN INSURED’S COVERAGE BEGINS and terminate WHEN AN INSURED’S COVERAGE ENDS as stated in the General Provisions of the Policy.

REIMBURSEMENT. While the Company has no duty to do so, if the Company pays DAMAGES or CLAIMS EXPENSES:
(a) within the amount of the applicable deductible; or
(b) in excess of the applicable limit of liability,
the INSURED shall, upon written demand, repay such amounts to the Company within thirty (30) days thereof. Failure to pay any amounts indicated above may lead to policy cancellation and the INSURED shall not have the right to any Extended Reporting Period option.
SUBROGATION. If the Company makes a payment under the Policy and the person to or for whom payment was made has a right to recover damages from another, the Company shall be subrogated to that right. That person shall do:

1. Whatever is necessary to enable the Company to exercise the Company's rights; and
2. Nothing after the loss to prejudice those rights.

If the Company makes a payment under the Policy and the person to or for whom payment is made recovers damages from another, that person shall:

1. Hold in trust for the Company the proceeds of the recover; and
2. Reimburse the Company to the extent of the Company's payment.

LIABILITY LIMITATIONS AND EXCLUSIONS
This insurance does not apply to any CLAIM or suit:

1. for BODILY INJURY or PROPERTY DAMAGE arising out of the ownership, maintenance, operation, use, loading or unloading of any AUTOMOBILE, watercraft, MOBILE EQUIPMENT or aircraft owned or operated by or rented or loaned to any INSURED, other than as a passenger.
2. based on or arising out of liability assumed by the INSURED under any contract or agreement, except liability arising out of the performance of written duties required by the Policyholder as part of the Covered Trip/Program;
3. arising out of discrimination on the basis of age, sex, race, creed, religion, marital status, national origin or sexual preference by any INSURED, including PERSONAL INJURY resulting there from;
4. arising from the transmission of or infection by, or the testing or the failure to test for the presence of Acquired Immune Deficiency Syndrome (AIDS), any AIDS related virus or any other disease transmitted through sexual contact or another person's body fluids;
5. based on or arising out of an actual or attempted dishonest, fraudulent, criminal act, act of violence, or malicious act or omission or deliberate misrepresentation committed by, at the direction of, or with the knowledge of any INSURED, including intentional tortious acts;
6. arising from acts by any INSURED expected or intended to cause BODILY INJURY or PROPERTY DAMAGE sustained (This exclusion does not apply to BODILY INJURY resulting from the use of reasonable force to protect person or property.);
7. arising from any obligation for which the INSURED or any carrier as their insurer may be held liable under any worker's compensation, unemployment compensation or disability benefits law, or under any similar law;
8. of PROPERTY DAMAGE to:
   a) property owned or being transported by the INSURED, or
   b) property rented to, occupied by or in the care of the INSURED;
9. brought against any INSURED alleging, in whole or part sexual assault, abuse, molestation, corporal punishment or physical or mental abuse, or habitual neglect, or licentious, immoral, amoral other behavior that was threatened, committed, or alleged to have been committed, by any INSURED or by any person for whom the INSURED is legally responsible; however, notwithstanding the foregoing, the INSURED shall be protected under the terms of this policy as to any claim and/or allegation which may be covered by the policy upon which suit may be brought against him, for any such alleged behavior by an INSURED unless a judgment or a final adjudication adverse to the INSURED shall establish that such behavior occurred as an essential element of the cause of action so adjudicated;
10. for injuries caused by or contributed to by the use, sale, manufacture, delivery, transfer or possession of controlled substances except as administered by a physician;
11. for BODILY INJURY OR PROPERTY DAMAGE arising from the use of alcohol, intoxicants drugs or narcotics, except as prescribed by a licensed physician;
12. for BODILY INJURY or PROPERTY DAMAGE due to war, whether or not declared, civil insurrection, rebellion or revolution or to any act or condition incidental to any of the foregoing;
13. for PERSONAL INJURY or BODILY INJURY to the INSURED or to a dependent of the Insured;
14. brought against any INSURED arising out of the INSURED’S business pursuits, investments, or other for profit activities;
15. for BODILY INJURY or PROPERTY DAMAGE caused directly or indirectly by nuclear reaction, radiation, contamination whether radioactive or not, regardless of how it was caused.
16. for BODILY INJURY or PROPERTY DAMAGE caused directly or indirectly by pollution or asbestos, regardless of how it was caused.
17. The INSURED’S rendering of day care services when such services are for persons other than the Host Family’s children.
18. for BODILY INJURY, PERSONAL INJURY, or PROPERTY DAMAGE arising out or participating in high-risk sports including: Hunting activities, boxing, combat sports, mountaineering or rock climbing, potholing, aerial
sports, heli-skiing, motorized racing or speed trials, bungee jumping, scuba diving (unless the Insured has the qualifications recognized by the competent local authority in the contracted destination), wild water rafting, jet-skiing, professional sports, and participation in competitive sporting events of any kind.

19. for BODILY INJURY or PROPERTY DAMAGE among or between INSUREDs traveling together and INSUREDs and their accompanying relatives.