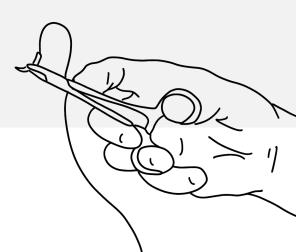
Coverage Summary

LEAGUE OF AMERICAN BICYCLISTS

Forget the insurance language, here's a summary of your coverage, which we hope answers your questions!





Eligibility

All Members of the League of American Bicyclists who elect voluntary coverage and pay the required premium.

Covered Activities

Bicycle (including e-bikes up to 750 watts) related activities, including but not limited to: commuting, group rides, training, gran fondos, as well as events sponsored and supervised by the Policyholder for whom premium has been paid. Coverage does not apply to any other sponsored races.

Policy Details

ACCIDENT

A sudden unexpected and unintended event, independent

Policy Benefits

COVERAGE	AMOUNT
Accident Medical Expense	\$25,000
Accidental Death & Dismemberment	\$5,000
Heart or Circulatory Malfunction	\$25,000

Policy Exclusions

We will not pay benefits for a loss due to or expenses incurred for:

- 1. Suicide or attempted suicide.
- 2. Intentionally self-inflicted injury.

of sickness and all other causes.

FIRST EXPENSES

Must be incurred within 90 days from the date of the accident.

TREATMENT TIME FRAME

Benefits paid up to 52 weeks from the date of the accident.

ACCIDENTAL DEATH & DISMEMBERMENT (AD&D):

Coverage is for death or severe dismemberment as the result of an accident while participating in a covered activity

HEART OR CIRCULATORY MALFUNCTION:

Coverage is for injury or death that is the result of heart failure while participating in a covered activity. No coverage for pre-existing heart conditions. 3. War or any act of war, whether declared or not. War or act of war does not include acts of terrorism.

4. Illness, disease, bodily or mental infirmity, bacterial or viral infection, or medical or viral infection or medical or surgical treatment thereof, except for any bacterial infection resulting from an accidental external cut or wound or accidental ingestion of contaminated food.

5. Piloting or serving as a crewmember.

6. Commission of or attempted to commit: a felony, an assault, or other illegal activity.

7. Active participation in a riot or insurrection.

8. Flight in, boarding, or alighting from an aircraft or any craft designed to fly above the earth's surface, except as a fare-paying passenger on a regularly scheduled commercial or charter airline, a passenger in a non-scheduled, private aircraft used for pleasure purposes with no commercial intent during the flight, or a passenger in a military aircraft flown by the Air Mobility Command or its foreign equivalent.

Policy Exclusions (continued)

9. Travel in or on any on-road or off-road motorized vehicle not requiring licensing as a motor vehicle.

10. An accident if the Insured is the operator of a motor vehicle and does not possess a valid motor vehicle operator's license, except while participating in driver's education program.

11. Services or supplies for the treatment of an Occupational Injury or Illness which are paid under the District of Columbia Workers' Compensation Act only to the extent such services or supplies are the liability of the employee, employer or workers' compensation insurance carrier according to final adjudication under the District of Columbia Workers' Compensation Act or an order of the District of Columbia Industrial Commission approving a settlement agreement under the District of Columbia Workers' Compensation Act.

12. Travel in any aircraft: owned, leased, or controlled by the Policyholder or any of its subsidiaries or affiliates. An aircraft will be deemed to be controlled by the Policyholder if the aircraft may be used as the Policyholder wishes for more than 10 straight days or more than 15 days in any year.

13. An accident that occurs while on active duty service in the: military, naval, or air force of any country or international organization. Upon Our receipt of proof or service, We will refund any premium paid for this time. Reserve or National Guard active duty training is not excluded unless it extends beyond 31 days. 17. Compliance of pregnancy or miscarriage, except as a result of a Covered Accident.

18. Elective or cosmetic surgery, except for reconstructive surgery needed as a result of a Covered Injury.

19. Orthopedic appliances used mainly to protect a Covered Injury.

20. Treatment or service provided by a private duty nurse.

21. Routine physical exams and medical services or wellness visits.

22. Mental and nervous disorders.

23. Medical emergency evacuation.

24. Experimental or investigative treatment or procedures.

25. Treatment by persons employed or retained by the Policyholder, or by any Immediate Family Member except for treatment for Dental Services provided for under this Policy, or member of the Insured's household.

26. Treatment of hernia, Osgood-Schlatter's Disease, osteochondritis, appendicitis, osteomyelitis, cardiac disease or conditions, pathological fractures, congenital weakness, detached retina unless caused by a Covered Injury.

27. Blood, blood plasma, or blood storage except expenses by a Hospital for processing or administration of blood.

28. Eyeglasses, contact lenses, hearing aids, wheelchairs, braces, appliances, examinations or prescriptions for them, or repair or replacement of artificial limit, orthopedic braces, orthotic devices.

14. The insured being under the influence of drugs or intoxicants, unless taken under the advice of a Doctor. Intoxication is defined by the laws of the jurisdiction where such Accident occurs. If the such jurisdiction does not have a law to define intoxication, then under this Policy it will mean a blood alcohol content of .08 or greater.

15. The Insured being under the influence of drugs or intoxicants while operating a motorized vehicle. Intoxication is defined by the laws of the jurisdiction where such Accident occurs. If the such jurisdiction does not have a law to define intoxication, then under this Policy it will mean a blood alcohol content of .08 or greater.

16. Pregnancy, childbirth, elective abortion, an abortion for any reason other than to preserve the life of the female upon whom the abortion is performed. 29. Covered medical expenses for which the Insured would not be responsible for in the absence of this Policy.

30. Conditions that are not cause by a Covered Accident

Coverage is underwritten and claims are serviced by Pan-American Life Insurance Company. League of American Wheelmen Inc. is the policyholder for Accident Insurance for All Members of the Policyholder who elect coverage and pay the required premium participating in Bicycle (including e-bikes up to 750 watts) related activities, including but not limited to: commuting, group rides, training, gran fondos, as well as events sponsored and supervised by the Policyholder for whom premium has been paid. Coverage does not apply to any other sponsored races. Coverage is subject to the terms, conditions, and exclusions of the policy. For a full list of policy exclusions email spot@getspot.com.