

**True North Hockey Canada Inc.**  
**Summary of Coverage**  
**September 15, 2021 to September 15, 2022**

**Description of Operations:** True North Hockey Canada Inc. (Recreational Hockey League)

**Insurer:** Markel Canada: Certain Underwriters at Lloyd's under Contract MKL2018001 - 100%  
**Policy Number:** ACL6663

**Location:** Suite 304 - 4920 Dundas St. W., Toronto, ON M9A 1B7

**PARTICIPANT ACCIDENT SCHEDULE OF BENEFITS**

BENEFIT	MAXIMUM AMOUNT PAYABLE
<b>Accidental Death and Dismemberment Benefits</b>	
Death	\$20,000.00 any one Insured
Loss of Use	\$30,000.00 any one Insured
Blanket Medical Expense Reimbursement	\$20,000.00 any one Insured
Blanket Dental Accident Reimbursement	\$1,000.00 any one Insured
Physiotherapy Limit	\$250.00 any one visit \$600.00 maximum per accident
Any injury which prevents the Insured from engaging in any occupation or employment for which he/she is reasonably suited by education, training or experience continuously for a period of 12 months from the date of the accident and is deemed to be permanent or irrecoverable.	\$30,000.00 any one Insured

**Supplementary Benefits**

Rehabilitation Benefit	\$10,000.00 any one Insured
Tuition Benefit	\$2,000.00 any one Insured
Occupational Training Benefit If an insured dies as the direct result of injuries sustained in an Accident covered by this policy, the Insurer will pay for expenses incurred by the Insured's spouse within thirty (30) months of the date of death of the Insured for a formal occupational training program for the purpose of specifically qualifying such spouse to gain active employment in an occupation for which the spouse would otherwise not have sufficient qualifications	\$3,000.00 any one Insured
Transportation / Accommodation Benefit	\$10,000.00
Home Alteration & Vehicle Modification Benefit	\$10,000.00
Blanket Dental Accident Reimbursement	\$1,000.00 any one Insured

**Exclusions**

Virus, Bacteria, Disease and Contagion Exclusion  
Terrorism Exclusion  
Sanction Exclusion

**Based on the following:** Participant Accident

Principal Sum	Participating Members
<b>\$20,000</b>	<b>2,500</b>

<b>TOTAL COMBINED ANNUAL PREMIUM</b>	<b>\$ 7,500.00</b>
<b>8% R.S.T.</b>	<b>\$ 600.00</b>
<b>TOTAL PREMIUM DUE</b>	<b>\$ 8,100.00</b>

\*Terrorism, Data, Mold & Fungi Exclusions are applicable to all sections of the policy.

**Subject to:**

Participants sign waivers every year. Please provide copy of the standard waiver  
Waivers are required to process Participant-Accident claims  
Helmet / Visor / Mouthguard Warranty for Dental Claims  
Terrorism Exclusion

**IMPORTANT:**

This "Summary of Coverage" is intended for use as evidence that the insurance coverage described herein is in force. It is subject to the standard terms, definitions and conditions of the policy issued by the insurer(s) for this type of insurance, the conditions, limitations and exclusions of which shall prevail at all times. It will terminate on its expiry date or when replaced by the actual policy, whichever occurs first.  
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