

MASTER POLICY

between

BULSTRAD LIFE INSURANCE JSC, a part of
 the Vienna Insurance Group
 (hereinafter the “Underwriter”)

and

ALLIANCE ABROAD GROUP L.P. a Texas
 limited partnership (hereinafter the “Group”),

1. Purpose of Insurance.

1.1. The Group completes on its behalf with the Underwriter a contract for group temporary medical insurance for international travelers temporarily outside their home country while participating in a program sponsored by Alliance Abroad Group L.P.

1.2. In exchange for payment of insurance premiums by the Group, the Underwriter obligates itself to provide specially designed international travel and medical insurance, in accordance with the requirements of the United States Department of State for J Visa Designees, subject to the terms and conditions contained herein and to reimburse insurance payments due upon occurrence of the risks covered.

2. Insureds.

Insureds are international travelers, participating in programs of the Group, and who are persons of age between 18 and 60 years.

3. Covered Risks.

1. Occurrence of unexpected and urgent medically necessary medical expenses (including 100% of covered expenses for In-hospital Medical Services, 100% of covered expense for In-hospital Surgical Services and 100% for Out of Hospital Medical Services) which are a direct consequence of an accident of an Insured which are not an Exclusion from the Insurance Coverage, and are within the limits of insurance responsibility which have occurred during the term of the individual insurance coverage;
2. Occurrence of unexpected and urgent medically necessary medical expenses (including 100% of covered expenses for In-hospital Medical Services, 100% of covered expense for In-hospital Surgical Services and 100% for Out of Hospital Medical Services) which are a direct consequence of illness of the Insured which are not an Exclusion from the Insurance Coverage, and are within the limits of insurance responsibility which have occurred during the term of the individual insurance coverage ;
3. In the event of the death of an Insured, the repatriation of the Insured’s mortal remains, including transportation of the body from the site of death to the sending funeral home to the airport, minimally necessary casket or air tray for transport, coordination of consular services, procuring death certificate, and transport of the remains from the airport to the receiving funeral home;
4. Expenses associated with medical evacuation; and
5. Bedside visitation for one family member in case of critical illness or accidents.

4. Insurance Coverage Limits.

4.1. The insurance limits per each risk covered are as follows:

COVERED RISKS	LIMIT
Medical expenses per accident or illness	50,000 USD
Repatriation of remains	7,500 USD
Medical evacuation	10,000 USD
Bedside visitation	1,500 USD
World-wide assistance service	included

4.2. The limit of responsibility of the Underwriter shall cover only actual incurred expenses, realized as a result of the occurrence of the risks covered under art. 3.

4.3. The deductible of an insured person per illness or event is 50 USD for the first visit and 25 USD for each follow-up visit but will not exceed a total of 500 USD per each one illness or accident; and 250 USD per emergency room (waived if admitted).

5. Excluded Risks.

- 5.1. The Underwriter shall not cover death or medical expenses which are caused directly or indirectly by:
1. Willful attempt at self-injury; suicide or attempted suicide;
 2. Criminal offense or attempted criminal offense by the Insured, death sentence execution, accident occurred while the Insured is arrested or imprisoned;
 3. War or hostilities, rebellion, power usurpation, riot or other similar acts, terrorism or terrorist act, which include, but are not limited to the use of force or violence and/or the threat thereof, of any person or group/s/ of persons, whether acting alone or on behalf of or in connection with any organization/s/ or government/s/, committed for political, religious, ideological or similar purposes including the intention to influence any government and/or to put the public, or any section of the public fear;
 4. Nuclear explosions, radioactive radiation, radioactive, chemical or biological contamination, natural catastrophes (which include, but not limited to storms, hurricanes, floods, lightnings, earthquakes, tsunamis, etc.), acts of God and all other similar events with or without mass consequences;
 5. AIDS, no matter how it is acquired or called, or HIV infection;
 6. Self-treatment, or disobedience of a doctor's advice;
 7. Pregnancy (incl. tubal pregnancy), childbirth, abortion and any consequent complications or diseases;
 8. Fight provoked by the insured;
 9. Involvement in hazardous activities including motor sports, flying, hang-gliding, sailing and under-water sports and hobbies, jumps from height, climbing requiring special equipment and speleology (spelunking);
 10. Consumption of alcohol, narcotics and other opiate or stimulative substances. In road accident with transportation vehicle, the stated by the law level of alcohol in the blood is taken into consideration, for the country where the accident has occurred; Injuries due to alcohol or drug consumption or accidents where the insured was operating a motor vehicle under the influence of drugs or alcohol.
 11. Use of weapons;
 12. Pre-existing disease or condition and complications thereof;
 13. Other events due to perilous or willful acts or gross negligence by the Insured.
- 5.2. The following expenses are not included in the scope of medical expenses coverage:
1. Costs related to medical examination, treatment and surgical intervention which are not administered by a licensed physician or in a licensed healthcare institution;
 2. Costs related to medical examinations, where no illness has been diagnosed or no accident has been ascertained;
 3. Costs related to venereal diseases, treatment of sterility, change of sex or implantation, transplantation of organs and the complications thereof;
 4. Costs of rehabilitation, physical therapy, kinesitherapy, and all expenses for spas, hydrotherapeutic treatment or other such resorts and facilities;
 5. Costs for medical help administered by homeopathic doctors or natural doctors;
 6. Medical help administered by relatives or husband/wife;
 7. Costs for medical repatriation or repatriation of remains, when it was not performed by the Coris International, and costs incurred after repatriation;
 8. All costs resulting from pre-existing diseases or conditions;
 9. Dental treatment – fillings, devitalization, prosthetic treatment and all alike, except emergency anesthesia and medically necessary dental surgery in case of accident;
 10. Costs relative to treatment of the mental health and mental disorders of the insured;
 11. Costs relative to cosmetic surgery for correction of the appearance;
 12. All costs relative to experimental or research services;
 13. All costs for medical examinations, or diagnostic examinations that are part of routine physical examination or health check, including vaccination, expenses for glasses, contact lenses, hearing-aids, prosthesis, artificial limbs, etc.;
 14. Costs for personal comfort during treatment such as: TV, radio, hairdresser or barber's services;
 15. Any part of the costs that exceeds the commonly necessary and inherent standard expenses that are covered in accordance with the conditions of this policy;
 16. All costs, which are a direct consequence of sunburn or burn in solarium, except for sunstroke;
 17. Costs for publication of certificates, and costs for translation of documents.

6. Territorial Scope.

The insurance covers covered expenses that have occurred on the territory of the USA and other jurisdictions that the parties may hereafter agree to and does not cover the territories of the Insured persons' countries of residence.

7. Assistance Company.

The Assistance Company is CORIS International. In case of a claim, the insured person should contact the US office of the Company within 48 hours at: +1 305 698 7757.