

# SCHEDULE OF COVER

Policy Holder	Rapha Racing Limited
Policy Number	YJALMB0000160
Insured Address	Rapha Works, 4 Elthorne Road, London, N19 4AG, United Kingdom
Effective from	01//02/2023 at 00:01
Expiry date	31/12/2023 at midnight

We agree to insure your members under the terms, conditions and exceptions contained in the policy wording and outlined in this schedule.

A copy of the policy wording is available  $\underline{\mathsf{HERE}}$ .

# **COVER SUMMARY**

#### **SECTION A - PROPERTY**

DESCRIPTION OF COVER	SUM INSURED	EXCESS
One (1) claim in a twelve (12) month period	up to a maximum of £1,000	
Bicycle Helmet	£250	£50
Bicycle Luggage	£500	£50
Bicycle Gadget	£500	£50

#### SECTION B - PERSONAL ACCIDENT

DESCRIPTION OF COVER	SUM INSURED	EXCESS
One (1) claim in a twelve (12) month period	up to a maximum of £1,000	
Fractures of:		Nil
(a) hip or pelvis	£300	
(b) leg(s)	£300	
(c) collar-bone(s), arm(s)	£300	
(d) skull (including cheekbone and jaw)	£300	
(e) shoulder blade(s)	£300	
(f) bone(s) in the foot or hand (excluding toes and fingers)	£300	
(g) spine	£1,000	
Dislocation of:		Nil
(a) knee, ankle, wrist, elbow, collarbone (excluding toes and fingers)	£100	
(b) any other dislocation requiring general anaesthetic or traction	£100	
(c) spine or hip(s)	£1,000	
Permanent facial scarring:		Nil
(a) new permanent facial scars between 3cm and 9cm	£500	
(b) new permanent facial scars longer than 10cm	£1,000	
Emergency Dental Fees	£300	£60
Physiotherapy Fees	£300	£60

### SECTION C - TRAVEL REIMBURSEMENT

DESCRIPTION OF COVER	SUM INSURED	EXCESS
One (1) claim in a twelve (12) month period	up to a maximum of £100	
Travel Reimbursement	£100	Nil

## **CLAIMS**

Remember that it is a condition of **your** policy that **your members** must provide all information and assistance **we** may require during **our** investigations. Failure to do so may result in unnecessary delays and expenses being incurred or **their** claim not being paid.