



CRYSTAL STUDIES

A COMPREHENSIVE INSURANCE PACKAGE FOR
STUDYING ABROAD

2015-2016



Download our free mobile app APRIL Expat!



APRIL International supports
the Foundation for Nature and Mankind
and Handicap International



CRYSTAL STUDIES, COMPREHENSIVE INSURANCE FOR STUDYING ABROAD!

Crystal Studies is an insurance solution designed for students and schoolchildren living abroad for up to a year for the purposes of travel, language training, au pair placements, internships or studies. You will be studying abroad for more than 12 months? Check out **Expat Student**, our insurance solution especially designed for studies of 12 months and more worldwide!

WHY TAKE OUT INTERNATIONAL INSURANCE?

The cost of healthcare abroad varies greatly from one country to another and can be very expensive. Often, the insurance cover you are entitled to at home is not valid abroad so, if you have health problems and need treatment, you have to pay the costs yourself.

Faced with medical expenses?

Emergency hospitalisation? Doctor's appointment?

Crystal Studies covers you for both regular and unexpected medical expenses from the 1st euro you spend. There is no excess to pay and we can arrange for your hospital bills to be settled directly. This means you have nothing to pay to the hospital. We'll take care of it!

Need assistance during your trip?

Involved in an accident and need to be repatriated straight away? Hospitalised and awaiting the arrival of a relative?

APRIL International will organise your repatriation, 24/7, to your home or to the most suitable hospital. We also cover the transport and accommodation costs of a relative coming to stay with you.

What if you are responsible for damage to others?

Did you accidentally damage the equipment you were using during your internship?

APRIL International covers you for damage caused to a third party in a private capacity or during your internship.

YOUR BENEFITS WITH CRYSTAL STUDIES

- › No waiting period or excess on medical expenses
- › No cash advance if you are hospitalised
- › Cover valid in each country you visit and during short return trips to your country of nationality
- › Meets requirements for the biggest international universities and the Schengen visa authorities
- › A translation service and a legal assistance hotline to help you with administrative procedures

FROM
€ **29**
PER MONTH

OUR MULTILINGUAL TEAMS AT YOUR SERVICE:



by telephone: +33 (0)1 73 02 93 93
Monday to Friday from 8.30 am to 6 pm - Paris time



by email: info.expat@april-international.com



at our offices: 110, avenue de la République
75011 Paris - FRANCE



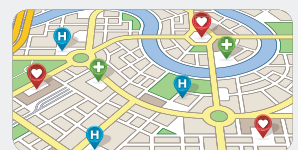
DISCOVER OUR EXCLUSIVE BENEFITS IN THE UNITED STATES



- No cash advance in our **healthcare networks**, we settle the bill directly for you to the following:
 - 5,000 hospitals
 - 490,000 primary care doctors & specialists
 - 57,000 pharmacies
 - 840,000 healthcare professionals
- **Online search facility** so you can find a healthcare provider near you
- **A home consultation service**: no long waits in the emergency room and no need to pay for the consultation

aetnaSM

**CVS
CAREMARK**



BENEFITS

For periods of 1, 2, 3... 6... or 12 months, get insurance cover designed specially for international students.

1 > MEDICAL EXPENSES

Up to €200,000 per insurance year

HOSPITALISATION	LEVELS
Medical or surgical hospitalisation*: Transfer by ambulance (if hospitalisation is covered by APRIL International) Hospital room and board (including daily hospital charge in France) Medical and surgical fees Pathology, diagnostic tests and drugs Medical procedures	100% of actual costs
Hospitalisation for the treatment of mental or nervous disorders*	80% of actual costs, up to 30 days per year
Direct payment of hospital charges during approved hospitalisation for more than 24 hours	provided on request 24 hours a day, if prior agreement has been obtained (unless a cover as a top-up to the EHIC has been selected)
Private room	up to €50 a day
ROUTINE HEALTHCARE	LEVELS
Consultations and procedures carried out by GPs or specialists	100% of actual costs (limited to €130 per year for eye care consultations and to 80% of actual costs and 5 sessions per year for the treatment of mental or nervous disorders)
Pathology, diagnostic tests, X-rays and drugs	100% of actual costs
Procedures carried out by nurses and physiotherapists** (following a reported accident)	100% of actual costs
Emergency dental treatment	up to €400 per year
Dental prostheses (following a reported accident)	up to €600 per year
Other prostheses (following a reported accident) Prescribed glasses or contact lenses (following a reported accident)	up to €500 per year
Contraceptives (condoms)	up to €20 per year

* Any hospitalisation is subject to prior agreement. An excess of 20% will be applied if you do not follow this procedure before your admission to hospital.

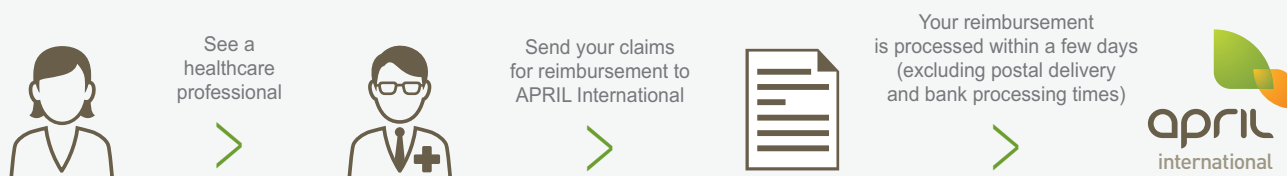
** Subject to prior agreement if more than 10 sessions are prescribed per insurance year.

DEFINITIONS

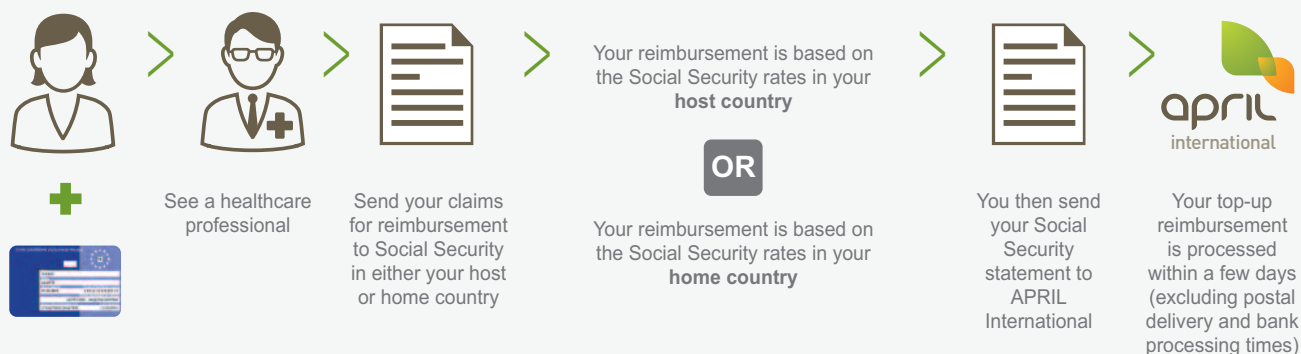
- > **Actual costs:** total medical expenses charged to you.
- > **Daily hospital charge:** portion of daily hospital costs in France not covered by French Social security.
- > **Direct payment of hospital charges:** if you are hospitalised for more than 24 hours, we can pay your hospital charges on your behalf: we will contact the hospital to settle your bill and you have nothing to pay up front.
- > **Excess:** sum for which you are responsible in the settlement of a claim.
- > **Prior agreement:** certain medical treatments and procedures require the prior agreement of our Medical Examiner. The practitioner prescribing these treatments or procedures must provide you with a request for prior agreement and a detailed breakdown of costs before incurring any corresponding treatment.
- > **Reported accident:** an accident recorded by a competent authority present at the scene (police, firefighters or paramedics) where a certificate was issued specifying the circumstances of the incident, the nature of the injury and the date of the accident.

HOW TO CLAIM REIMBURSEMENT OF YOUR MEDICAL EXPENSES

1 If you opted for a cover from the 1st euro spent



2 If you opted for a cover as a top-up to the EHIC



THE EUROPEAN HEALTH INSURANCE CARD (EHIC)

This card provides proof of entitlement to healthcare insurance for members of the European Union. It allows you to access the public healthcare system while on a temporary stay in another Member State in accordance with local legislation and formalities. It is valid for 12 months. The card can be used within the countries of the European Union (see the complete list at page 10) as well as in Switzerland, Iceland, Norway or Liechtenstein.

SOME USEFUL TIPS BEFORE YOU LEAVE

- Scan or photocopy all your important documents: visa(s), identity papers (passport,...), as well as your airline tickets or international driving licence; this will make it easier to make a claim if they are lost or stolen.
- Check the expiry date on your credit or debit card, if you are taking it with you.
- Keep receipts or invoices for your valuables (camera, laptop etc.). This will be helpful if you need to make a baggage claim.
- Don't forget your insurance card or APRIL International client reference number so that you can reach us quickly if problems arise.
- **Don't forget to download your APRIL Expat mobile application.**
The app will provide you with all the information you need on your destination country by means of a "Country Guide" (transport, administration, healthcare, currency and tourism), access to a free medical database with more than a thousand hospitals listed worldwide, local numbers to call in a medical emergency, around thirty common expressions and around a hundred medical terms in thirteen languages...



BENEFITS (CONTINUATION)

	LEVELS
2 > REPATRIATION ASSISTANCE	
Medical evacuation and repatriation	100% of actual costs
Compassionate emergency visit for hospitalisation of more than 6 days	return ticket and €80 per night, maximum 10 nights
Compassionate emergency return in case of death or hospitalisation of a family member	return ticket
Emergency return due to a terrorist attack or a natural disaster	one-way ticket
Emergency dispatch of prescribed medication not available locally	postage costs
Search and rescue costs	up to €5,000
Return of remains	100% of actual costs
Provision of coffin	up to €1,000
Advance payment of bail abroad	up to €15,000
Emergency message relay	100% of actual costs
Travel assistance if personal items are lost or stolen	up to €1,000 (advance)
Enforced stay abroad	€80 per night, maximum 5 nights
Translation of legal and administrative documents	up to €500 per year
Health and travel information	up to 3 phone calls
Delayed baggage	up to €200
Student life insurance	in the event of medical repatriation, reimbursement up to €200 (school fees, rent and transport costs)
3 > LEGAL ASSISTANCE	
Legal, practical and administrative information	telephone calls or exchanges of email
Legal assistance in the event of a dispute (legal defence and appeal)	up to €16,000 per insurance year
4 > PERSONAL LIABILITY private capacity, internships and tenant's liability	
Bodily injury	up to €4,500,000 per claim
Material and consequential damage	up to €460,000 per year, including €92,000 for consequential damage, excess €75
Material damage caused during internships	up to €12,000 per year, excess €75

BENEFITS (CONTINUATION)

	LEVELS
5 > PERSONAL ACCIDENT	
Accidental death	€10,000, or funeral expenses for the under 16's
Accidental disability	up to €40,000, proportional excess 20%
6 > BAGGAGE COVER	
Luggage which is lost, stolen or destroyed in an explosion or fire or by water during the outward or return trip or during the stay	up to €1,600, excess of €15 per claim, benefit limited to 50% for valuables, i.e. up to €800
7 > DELAYED DEPARTURE	
Refund of fees charged by airline companies in case of inbound or outbound flight modification	up to €100, airline tickets only

HOW CAN WE HELP YOU?



At the end of your study year in Canada, you decide to take some time out to explore the Rocky Mountains. As you make the final descent, you slip on damp ground, break your leg and suffer extensive bruising.

> With Crystal Studies, you will be flown by emergency helicopter to the nearest hospital and, if you need to stay longer in hospital, we will arrange for a family member to be with you.

You've just arrived in Germany for an exchange year and are a bit lost with all the paperwork waiting for you.

> You call the APRIL International legal and administrative hotline; our consultants will tell you all you need to know about opening a bank account in Germany, getting a work permit, understanding the rental agreement for your apartment and assisting you with your visa application etc.



You're going to work as an au pair in France. Everything goes perfectly to plan, you are warmly welcomed by the family and the two children are making good progress thanks to your English lessons. A few weeks after, you trip and accidentally knock over a very old and expensive piece of sculpture.

> With your personal liability cover, your host family will receive compensation to replace the sculpture and you can continue your stay under the best possible conditions!

On an internship in Brazil your backpack gets stolen during a visit to Rio. Everything is gone: your laptop, camera and, most importantly, your passport and wallet.

> APRIL International will advise on how to get your documents replaced and offer you a cash advance until you get a new bank card. You will also receive compensation for your stolen belongings.



HEALTHCARE COSTS ABROAD

Healthcare costs vary greatly from one country to another and can sometimes produce nasty surprises. With Crystal Studies, both your health and your budget are protected.



Martin is on an internship in **New-York**. Following an attack of appendicitis, he is admitted to hospital for emergency surgery. How much would he have had to pay out of his pocket without insurance?

> **USD 13,000**



Mathilde is working as an au pair for a year with a family in **Spain**. She needs to see an ENT specialist. The cost of a specialist consultation in the private sector in Barcelona?

> **€90**

Anthony is studying for his Masters at the University of **Mexico City**. He breaks his foot during a visit to the city of Teotihuacan. The cost of treating the fracture and the follow-up physiotherapy in Mexico City?

> **€12,000**



The costs shown refer to cases handled by our medical department. They are provided for information purposes only and have no contractual value.

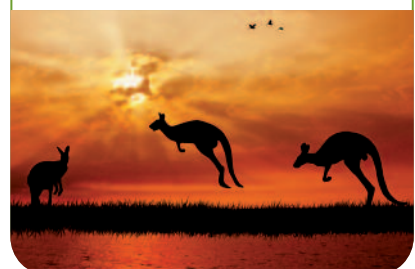
During her Erasmus year in **France**, Emilia slips on a patch of ice and falls heavily. She's in hospital for 3 days under observation for a potential head injury. She also needs a CT scan. The amount of the hospital bill?

> **€5,100**



During her semester in **Australia**, Johanna has a car accident. She is rushed to hospital in Sydney. The cost for her to be hospitalised and repatriated?

> **€23,000**



MONTHLY PREMIUMS (ALL TAXES INCLUDED)

For policies taken out before 01/10/2016.

A fee of €3 per month will apply if you are paying in monthly instalments and will be added to your premium.

The monthly payment method is not available if your trip includes a half-month.

LEVEL OF COVER	TYPE OF COVER	LENGTH (min. 1 month, max. 12 months)	AGE BAND	
			UP TO 30 YEARS	31 - 40 YEARS
COMPLETE OPTION: Benefits 1 to 7	Cover from the 1st euro spent	15 days	€34	€59
		1 month	€46	€79
	Cover as a top-up to the EHIC	15 days	€25	€44
		1 month	€36	€61
MINI OPTION: Benefits 1 and 2 only	Cover from the 1st euro spent	15 days	€30	€50
		1 month	€39	€63
	Cover as a top-up to the EHIC	15 days	€22	€36
		1 month	€29	€46



EHIC top-up cover is available to children and students who are covered by the statutory Social Security scheme of one of the EU countries, Switzerland, Norway, Iceland and Liechtenstein. **To qualify, you must apply for a European Health Insurance Card from your Social Security centre before leaving. You should then show the card to the medical authorities in your host country. In this case, APRIL International will only provide top-up reimbursements if you can provide evidence of having first received compensation from the statutory scheme.**



Unlike the Complete option, the Mini option does not provide cover for all eventualities arising during a trip abroad. It provides basic cover but APRIL International recommends the Complete option.

EXCLUSIVE BENEFITS, SPECIALLY DESIGNED FOR YOUNG PEOPLE ABROAD!

> Having trouble understanding a document in a foreign language?

A tenancy agreement in German, an employment contract in French or a certificate from your host university in Chinese? Simply ask us for a translation in your mother tongue of the administrative or legal documents you need.

> Questions about visas, work permits? How to open a bank account abroad?

Our multilingual hotline is available to answer all your practical and legal questions.

> Your washing machine leaks and causes water damage to the apartment below yours?

With your tenant's liability cover, we will pay for any damage to your neighbour's apartment.

> You cause material damage during your end-of-studies internship?

With the extension of your liability cover to internships, you're covered if you cause damage to equipment used during your internship.

HOW THE POLICY OPERATES

USEFUL INFORMATION BEFORE YOU APPLY

DISCOVER THE
CRYSTAL STUDIES POLICY
IN VIDEO FORMAT



WHO IS THE POLICY DESIGNED FOR?

- any student, school pupil or au pair under the age of 41, living abroad,
- for the purposes of travel, language courses, au pair placements, internships or studies.

WHERE AM I COVERED?

If you selected a cover from the 1st euro spent, you are covered anywhere in the world (including in your country of nationality during short return visits).

If you selected an EHC top-up policy, you are covered in the following countries: Austria, Belgium, Bulgaria, Croatia, Cyprus, the Czech Republic, Denmark, Estonia, Finland, France (including Guadeloupe, Martinique, French Guyana and Reunion Island), Germany, Greece, Hungary, Iceland, Ireland, Italy, Latvia, Liechtenstein, Lithuania, Luxemburg, Malta, the Netherlands, Norway, Poland, Portugal (including Madeira and the Azores), Romania, Slovakia, Slovenia, Spain (including the Balearic and Canary Islands), Sweden, Switzerland and the United Kingdom (England, Scotland, Wales, Northern Ireland and Gibraltar). You are also covered in your country of nationality during short return visits, if your country is listed above.

Certain countries may be excluded from the policy as a result of heightened tension there. The list of excluded countries is available at www.april-international.com or by calling +33 (0)1 73 02 93 93.

WHAT IS THE MAXIMUM PERIOD OF COVER?

The Crystal Studies policy is available for a minimum period of one month and a maximum of 12 months. It is renewable up to three times, subject to insurers' agreement, on condition that you remain in full-time education or that your au pair placement continues.

HOW TO APPLY

- 1 Fill in and sign the attached Application form.
- 2 Enclose a photocopy of your student card or school attendance certificate (if you are going abroad to work as an au pair, please enclose a copy of your contract with the host family along with your application form).
- 3 Send your application to: APRIL International Expat - Service Adhésions Individuelles - 110, avenue de la République CS 51108 - 75127 Paris Cedex 11 - FRANCE.

You can also apply online and will receive your insurance certificate by email within minutes.

WHAT HAPPENS IF I CHANGE OR CANCEL MY TRIP?

If you cancel your trip, we will refund your premium if you let us know in writing before the effective date of your policy and you return the original of your Membership certificate and your APRIL International card, if you have one.

If you decide to cut short your stay and return permanently to your country of nationality, you should send us a registered letter with proof of receipt enclosing documented evidence of your return home (receipt for payment of electricity, gas or telephone bill, etc). We will then cancel your policy and refund any premium due.

SERVICES

TO SUPPORT YOU THROUGHOUT YOUR STAY ABROAD



YOUR CUSTOMER ZONE ONLINE

INTUITIVE AND FAST, IT MAKES YOUR LIFE EASIER !

With a few clicks from your **computer**, **tablet** or **smartphone**, you can access:

- > all the documents you need (insurance certificate, insurance card, general conditions etc.),
- > your bank and personal contact details,
- > your reimbursements, if you are the insured,
- > a breakdown of your premiums (download your premium notices and pay online).



EXTENSIVE THIRD PARTY PAYMENT SERVICES

If you are hospitalised for more than 24h, we can pay your hospital charges on your behalf: we will contact the hospital directly and settle your bill so there's no cash advance required.

This service is not available if you selected an EHIC top-up cover.

Going to the US?

You are also entitled to a third party payment card for your routine healthcare costs (pharmacy items, consultations, tests and X-rays) from our partners healthcare providers. You'll have nothing to pay; we'll settle the bill on your behalf!

YOUR INSURANCE CARD INCLUDING EMERGENCY CONTACT NUMBERS, AVAILABLE 24/7 FOR:

- > direct payment of hospital charges if you are hospitalised for more than 24 hours (unless you selected EHIC top-up cover),
- > requesting emergency assistance,
- > contacting the legal assistance service.

The card facilitates your admission to a medical centre in the event of emergency hospitalisation. To simplify procedures, the card contains your personal details: name, first name(s) and policy number.

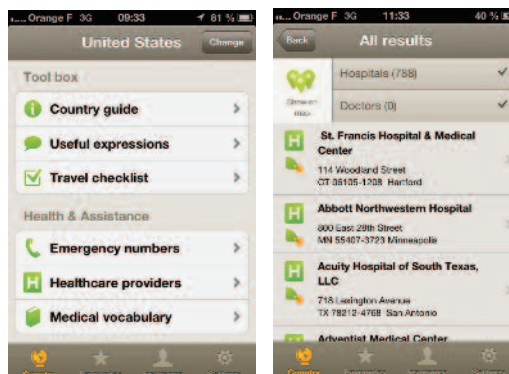


THE APRIL EXPAT MOBILE APP

To help you prepare your trip and support you once you've arrived with:

- > a **country guide** for instant access to essential information on your destination country,
- > **common expressions and medical terms** in 13 languages,
- > a **check-list** to make sure nothing is forgotten before you leave,
- > **details of healthcare providers worldwide: to find the nearest hospitals** using a search facility with a geolocation option,
- > **local emergency numbers** (fire department, police, medical emergency) in your destination country and APRIL International Expat emergency numbers.

APRIL Expat is available for free from the **Apple Store** and **Google Play**.



APRIL, CHANGING THE IMAGE OF INSURANCE

WORLDWIDE
PRESENCE
IN 34 COUNTRIES

APRIL, an international insurance services group, has chosen innovation as the key to driving its development, by seeing insurance from the customer's perspective. Making this commitment, which means pushing boundaries and keeping things simple, has enabled APRIL to become in under 20 years the leading wholesale broker in France and an international authority with operations in 34 different countries.

Over 3.800 staff members insure, advise, design, manage and distribute insurance solutions and assistance services for private individuals, professionals and businesses, amounting to some 6 million policyholders. APRIL's turnover in 2014 was €766.3 million.

APRIL INTERNATIONAL, SPECIALISING IN INTERNATIONAL INSURANCE FOR 40 YEARS

OUR PROMISE

- › Top quality management of your insurance choices with 3 offices in Paris, Bangkok and Mexico City
- › Multilingual teams at your service
- › Clear and easy to understand products supported by a range of services

For every expatriate situation, an international insurance solution

Whether you're a student, on an internship, planning a working holiday, in work or retired, travelling alone or with your family, APRIL International will support you during your time abroad with a range of comprehensive and flexible insurance solutions suitable for all kinds of expatriates and all budgets.

FOR MORE INFORMATION, CONTACT YOUR INSURANCE CONSULTANT:

FAC INTERNATIONAL

56 rue de Londres

75008 Paris

☎: 01 44 70 77 70

☎: 01 42 93 44 93

✉: facinternational@fac-international.com

🌐: www.fac-international.com

153777



april international | expat

Headquarters:

110, avenue de la République - CS 51108 - 75127 Paris Cedex 11 - FRANCE

Tel.: +33 (0)1 73 02 93 93 - Fax: +33 (0)1 73 02 93 90

Email: info.expatriat@april-international.com - www.april-international.com

Public limited company with capital of €200,000 - Registered with Companies House in Paris under number 309 707 727

Insurance broker - Registered with ORIAS (Organisation for the registration of insurance brokers) under number 07 008 000 (www.orias.fr)

Autorité de Contrôle Prudentiel et de Résolution (Prudential Supervision and Resolution Authority)

61, rue Taitbout - 75436 Paris Cedex 09 - FRANCE.



Changing the image of insurance.

APPLICATION FORM
2015-2016

CRYSTAL STUDIES



APPLICATION FORM CRYSTAL STUDIES

Insurance consultant reference number: I 53777

Are you already customer at APRIL International Expat? ☐ YES ☐ NO

If yes, please indicate your Customer Number:

C

PLEASE WRITE IN CAPITAL LETTERS

INSURED	Person to be insured
Title:	Mrs <input type="radio"/> Mr <input type="radio"/> Date of birth: <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> (upper age limit of 40)
Surname:	<input type="text"/>
First names:	<input type="text"/>
Country of nationality:	<input type="text"/>
Country of destination:	<input type="text"/>
Email:	<input type="text"/>
(Providing an email address will allow you to access your online Customer Zone)	
Reason for trip : Study <input type="radio"/> Leisure <input type="radio"/> Training <input type="radio"/> Language course <input type="radio"/> Au pair placement <input type="radio"/>	
1	School or organisation which the insured attends : <input type="text"/>
Address for delivery of correspondence: <input type="text"/>	
Postcode:	<input type="text"/> City: <input type="text"/>
State/Region/Land/Country: <input type="text"/>	
Country: <input type="text"/>	
Telephone:	+ <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Cell phone:	+ <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Any correspondence from us (your insurance certificate, general conditions, reimbursement statements etc.) will be sent by email. If you would also like to receive a paper version, please tick this box: <input type="radio"/>	
Your insurance card will be sent by post.	
I would like to receive my correspondence in: English <input type="radio"/> French <input type="radio"/> Spanish <input type="radio"/> German <input type="radio"/>	

MEMBER = PERSON PAYING THE PREMIUM	<input type="radio"/> The insured is paying the premium (in this case, the information below is not required) <input type="radio"/> Someone else is paying the premium
Title:	Mrs <input type="radio"/> Mr <input type="radio"/>
Surname:	<input type="text"/>
First names:	<input type="text"/>
Address:	<input type="text"/>
2	Postcode: <input type="text"/> City: <input type="text"/>
State/Region/Land/Country: <input type="text"/>	
Country: <input type="text"/>	
Telephone:	+ <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Cell phone:	+ <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Email:	<input type="text"/>
(Providing an email address will allow you to access your online Customer Zone)	
I would like to receive my correspondence in: English <input type="radio"/> French <input type="radio"/> Spanish <input type="radio"/> German <input type="radio"/>	

PERIOD AND LEVEL OF COVER	
3	Period of cover required: from <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> to <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
for a duration of: <input type="text"/> <input type="text"/> months (minimum 1 month, maximum 12 months)	
Type of cover selected: <input type="radio"/> Complete cover or <input type="radio"/> Mini cover <input type="radio"/> 1st euro or <input type="radio"/> EHIC top-up	
Please note: you must send us a photocopy of your student card or current school attendance certificate before your policy can take effect. If you are going abroad to work as an au pair, please send us a copy of your contract with the host family along with your application form.	

FOR MEDICAL EXPENSES, YOU CAN BE REIMBURSED BY:

- 4
- ☐ cheque in euro
 - ☐ bank transfer to a bank account in France. In this case, please send us details of your bank account.
 - ☐ bank transfer to an account in the USA. International bank details are required including the IBAN number, SWIFT code, your bank's address, sort code and an ABA routing number.
 - ☐ bank transfer to an account in other countries. International bank details are required including the IBAN number, SWIFT code, your bank's address.

Depending on your bank account location, bank charges may apply to your reimbursement.

ADDITIONAL INFORMATION FOR THE PERSONAL ACCIDENT BENEFIT (COMPLETE OPTION)

In the event of death I name as beneficiary:

- 5
- ☐ My surviving spouse on condition that we were not legally separated when the lump sum became payable; second, equally, my children living, unborn or represented as such; third, equally my ascendants and fourth my other heirs
 - ☐ Other beneficiaries (please specify their surname(s), name(s), date and place of birth and percentage of the capital to be allocated):

.....
.....
.....

In the absence of a precise designation of the beneficiaries, the death benefit shall be transferred to the surviving spouse on condition that you were not legally separated when the lump sum became payable; second, equally, to the children living, to be born or represented as such; third, equally to the ascendants and fourth to the other heirs.

CALCULATION OF PREMIUM

Depending on your age band, the choice of option (Mini or Complete), the choice of cover (1st euro or EHIC top-up) and the payment method selected (full payment on application or monthly instalments), go to page 9 of the brochure to calculate your premium.

Number of months: .

6 Monthly premium (all taxes included): € **A**

Premium for 15 days (all taxes included): € **B** (if your trip includes a half-month)

Total premium (all taxes included): **A** x month + **B** = €

Reminder: a €3 monthly fee will apply if you choose to pay in monthly instalments. This fee will be added to your premium.

SELECTION OF PAYMENT METHOD

☐ Full payment at time of application by:

☐ cheque, please make it payable to **APRIL International Expat**

☐ credit/debit card, please enter your card details below:

Only Eurocard-Mastercard and Visa cards are accepted: ☐ Eurocard-Mastercard ☐ Visa

Card number: / / / Expiry date: /

The last three digits of the security number printed on the reverse side of your card:

Cardholder:

7 ☐ Payment in monthly instalments (by SEPA direct debit from a bank account in Euros - countries of residence accepted : France, Monaco, Germany)

Please send us your bank details and fill in the attached SEPA direct debit authorisation form.

You wish to pay the first premium by:

- ☐ credit/debit card, please fill in the boxes above
- ☐ cheque, please make it payable to **APRIL International Expat**

This Health questionnaire is valid for 6 months.

For example, if you want your policy to start on 01/07/2016, you can sign this questionnaire between 01/01/2016 and 30/06/2016.

You must personally answer all the questions as accurately as possible as your responses are binding. This simplified health questionnaire is essential to the evaluation of the risk that the insurer proposes to undertake.

Any unanswered questions will result in further enquiries.

Any medical information you provide is held in strict confidence. Detailed answers will help us process your application promptly.

The Medical Examiner reserves the right to ask the doctors having treated you to confirm the validity and comprehensiveness of the information provided in the Health questionnaire and to ensure that the conditions being treated do not contradict or are not inconsistent with the information provided when the insurance was purchased. This request may be made at any time, including prior to the processing of a claim or the issuing of a hospital cover note.

If you wish your answers to remain confidential, make a copy of the blank health questionnaire, fill it out and send it to us enclosing all the supporting documentation required in a sealed envelope with the word "Confidential" for the attention of the Medical Examiner to the following address: APRIL International Expat - 110, avenue de la République - CS 51108 - 75127 Paris Cedex 11 - FRANCE.

Some of the medical information you provide may be processed electronically for the use of the APRIL International Expat's Medical Examiner. Under the French Act of 6th January 1978 (amended), you have the right to access and, if necessary, rectify any personal information held on file by writing to the APRIL International Expat's Medical Examiner at the above address.

1	Do you have a condition, an illness or any aftereffect resulting from an accident whether or not it requires regular medical supervision and/or treatment?	<input type="radio"/> YES <input type="radio"/> NO
2	It is planned over the 12 months following the effective date of cover under your policy for you to be admitted to hospital (for removal of tonsils, knee surgery, removal of a cyst, childbirth or any other reason)?	<input type="radio"/> YES <input type="radio"/> NO

8 Further details if the response to one of the question is YES:

To help us process your application, please provide further details regarding the events surrounding the illness or accident and any consequences resulting from it.

ADDITIONAL INFORMATION

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THE INSURERS' MEDICAL EXAMINERS RESERVE THE RIGHT TO REQUEST FURTHER MEDICAL EXAMINATIONS.

Any non-disclosure, intentional misrepresentation or inaccuracy altering the nature of the risk or influencing the insurers to reduce the risk will result in the cancellation of all cover under the policy. In such circumstances the premium will not be refunded (art. L113-8 of the French Insurance Code).

I hereby certify that I have answered all the questions accurately and honestly and have neither included or omitted anything which might mislead the insurers of the present policy.

Signed in (city)

Date / /

Signature of the insured preceded by the words « I have read, understood and accepted the policy document »:

If the person to be insured is a minor, a parent or legal guardian must sign on his or her behalf:

SIGNING THE APPLICATION

I hereby apply for membership of the Association des Assurés d'APRIL International under their agreements with Groupama Gan Vie and ACE Europe. I have read the Association's statutes and regulations (available to download at <http://en.april-international.com/global/april-international-expat/association-of-april-international-insured>).

By choosing personal liability (private capacity), baggage and legal assistance cover (included under the Complete Option), I am applying for insurance with ACE Europe and Solucia PJ under this policy.

I have read the General conditions Cs 2016 outlining the details of my insurance cover. I am aware of my right to cancel the insurance and accept the terms and conditions. I have retained a copy of these. I also understand the terms and conditions of APRIL International Expat's handling of my insurance cover. If my insurance cover is subsequently amended, I accept that the General conditions applied will be those outlined above.

I have been informed that the information requested is required in order to process my application and that these details will be held electronically by APRIL International Expat, the insurers or their agents for the requirements of my insurance cover.

Under the French Act of 6th January 1978 (amended), I have the right to access and, if necessary, rectify any personal information held on file by writing to APRIL International Expat, 110 avenue de la République, CS 51108, 75127 Paris Cedex 11, FRANCE. APRIL International Expat has the right to use certain administrative information and to share it with associated businesses who may use it to make me aware of new products or services. A list of these companies is available on request.

Under the French Act of 6th January 1978 (amended), I have the right to prevent my details being passed on in this way by writing to APRIL International Expat at the above address. Postal charges will be refunded.

Furthermore, in order to meet its legal obligations, APRIL is implementing a monitoring procedure the purpose of which is to combat money laundering and the financing of terrorism, and the application of financial penalties. In accordance with article L561-45 of the French Monetary and Financial Code, I can exercise my right of access by applying to the French Data Protection Agency, Commission Nationale Informatique et Libertés - 8, rue Vivienne - CS 30223 - 75083 Paris Cedex 02 - FRANCE. However, if the request is in connection with the procedure introduced for the purpose of identifying persons whose assets have been frozen or on whom a financial penalty has been imposed under the French Data Protection Act 78-17 of 6th January 1978, I can exercise my right of access by sending a letter, together with a copy of my ID, to APRIL International Expat - 110, avenue de la République - CS 51108 - 75127 Paris Cedex 11 - FRANCE.

I understand that telephone calls to APRIL International Expat may be recorded for administrative purposes and that I may have access to recordings made of my calls by writing to APRIL International Expat at the above address. I understand that each recording is kept for a maximum of 2 months.

9 I understand that cover under the present policy does not exempt me from paying contributions to any state scheme to which I may belong.

I agree to pay back to APRIL International Expat any amount reimbursed to me by Social security and/or any private healthcare insurer (unless an EHIC top-up cover has been selected).

I accept that the reimbursement of or compensation for expenses incurred as a result of illness, maternity or an accident cannot exceed the amounts which were invoiced to me. I understand that APRIL International Expat requires me to declare any similar insurance cover which I may have purchased from other insurers.

I understand that the insurers will not cover any costs deemed to be unreasonable and unusual considering the location in which they were incurred.

I authorise APRIL International Expat and my treating doctors to exchange any information, including medical details, required for the management of my claims.

I confirm that I have answered all of the questions accurately and honestly and have neither included or omitted anything which could mislead the insurers of the present policy.

Signed in (city)

Date / /

Signature of the insured preceded by the words « I have read, understood and accepted the policy document »:

Signature of the member (if different from the insured) preceded by the words « I have read, understood and accepted the policy document »:

Your insurance consultant stamp code
+ APRIL International Expat code

FAC INTERNATIONAL
56 rue de Londres
75008 Paris
☎: 01 44 70 77 70
📠: 01 42 93 44 93
✉: facinternational@fac-international.com
🌐: www.fac-international.com
153777

YOUR APPLICATION STEP BY STEP:



Fill in your Application form and send it to APRIL International Expat.
If you need help, read the tips on the last page or contact us.

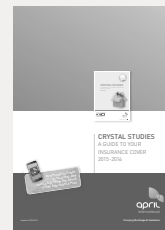
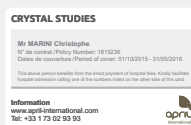
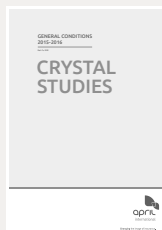
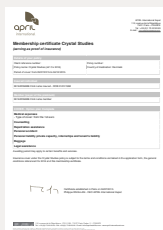


Your application is processed within 24 hours.



You will be sent:

- your Membership certificate serving as your insurance certificate,
- the General conditions showing how your policy operates,
- your insurance card containing emergency contact numbers for requesting assistance services or before admission to hospital,
- a Guide to your insurance cover, giving an overview of how your policy works and all the useful contact details.



Please send your completed application to:

**APRIL International Expat
Service Adhésions Individuelles
110, avenue de la République - CS 51108
75127 Paris Cedex 11 - FRANCE**

To cancel your policy, please use the tear-off slip below and send it to
APRIL International Expat - 110, avenue de la République - CS 51108 - 75127 Paris Cedex 11 - FRANCE

CANCELLATION OF DOOR-TO-DOOR CONTRACT OF SALE

Article L.112-9 of the French insurance code

Any person who is canvassed at their home or residence or place of work, even if this visit was at their own request, and who signs an insurance proposal or contract for a purpose which is not related to their commercial or professional activity, may cancel this agreement by sending a letter by recorded delivery with proof of receipt during a period of 14 days from the day of signature of the agreement without requiring to specify the reason for the cancellation or being subject to penalties.

Conditions: If you wish to cancel your insurance policy, please fill in and sign this tear-off slip. You should then send it in a sealed envelope by registered letter with proof of receipt to the above address. It must be sent no later than 14 days on the day following signature of your application or, where the deadline expires on a Saturday, Sunday or a bank holiday or other non-working day, on the next working day.

I, the undersigned, wish to cancel my application for insurance under the following policy:

Policy name: **Crystal Studies Ref. Cs 2016**

Date of signature of application: / /

Member's surname:

Member's first name:

Member's address:

Postcode: City:

Country:

Telephone: / / / / /

Name of insurance consultant:

Address of insurance consultant:

Postcode: City:

Country:

Telephone: / / / / /

Date and member's signature:

/ /

Reserved for APRIL International Expat: Client reference number



TAKING OUT THE INSURANCE

- A. Fill in your personal details (surname, first name, address...) ① and ②.
- B. Select the period and level of cover ③.
- C. Choose the method of reimbursement of your medical expenses ④.
- D. If you are applying for the Crystal Studies "Complete" option, please designate the beneficiary/beneficiaries in the event of death ⑤.
- E. Depending on your age band and your choice of cover (1st euro or EHIC top-up) and the selected method for paying the premium (full payment on application or monthly instalments), refer to page 9 of the brochure to calculate the amount of your premium and fill it in ⑥.
- F. Select the payment type (full or monthly) and the payment method ⑦.
- G. Complete, date and sign your Health questionnaire ⑧.
- H. Date and sign the Application form ⑨.
- I. Enclose with your application:
 - a photocopy of your current student card or school attendance certificate (if you are going abroad to work as an au pair, please send us a copy of your contract with the host family),
 - **a cheque in € made payable to APRIL International Expat or provide details of your credit/debit card** in order to pay your premium in full or to pay your first premium in case of payment in monthly instalments.
- J. If you are paying in monthly instalments:
 - fill in the attached SEPA direct debit authorisation form,
 - attach your bank details.

Send your application form and supporting documents to
APRIL International Expat - Service Adhésions Individuelles
110, avenue de la République - CS 51108 - 75127 Paris Cedex 11 - FRANCE

WHAT HAPPENS NEXT?

Your application is processed within 24 hours, as soon as we receive your Application form and supporting documents.

Your insurance is evidenced by a Membership certificate (serving as insurance certificate) showing details of the cover you have selected and the effective date of your policy.

Your policy will start on the date shown on the Membership certificate and, at the earliest, on the day following receipt of your Application form and supporting documents.

april international | expat

Headquarters:
110, avenue de la République - CS 51108 - 75127 Paris Cedex 11 - FRANCE
Tel.: +33 (0)1 73 02 93 93 - Fax: +33 (0)1 73 02 93 90
Email: info.expat@april-international.com - www.april-international.com

Public limited company with capital of €200 000 - Registered with Companies House in Paris under number 309 707 727
Insurance broker - Registered with ORIAS (Organisation for the registration of insurance brokers) under number 07 008 000 (www.orias.fr)
Autorité de Contrôle Prudentiel et de Résolution (Prudential Supervision and Resolution Authority)
61, rue Taitbout - 75436 Paris Cedex 09 - FRANCE.



Changing the image of insurance.