emma

Life insurance

Policyowner:

Policy Number:

Effective Date:

Insurer: Humania Assurance Inc.

Summary of Coverages

POLICY Nº:

INSURED:

RISK CLASS: [SEX, AGE, SMOKING STATUS]

Your contract is composed of this policy, the application, the eligibility and insurability questionnaire and any policy rider or notice of change annexed to this policy.

Please read your contract carefully, including this policy, the application and the eligibility and insurability questionnaire and validate the answers given therein. If the answers do not reflect your statement or are inaccurate, you must notify the Insurer accordingly within thirty (30) days following the delivery of the policy. Failure to notify the Insurer of any inaccuracy or erroneous statement can render the contract void. Subject to the provisions and riders of the policy, the Insurer will pay the benefits listed below when a covered event occurs.

Should the Insurer receive a request to cancel the contract or a stop-payment order on any premium due, all obligations of the Insurer under the contract terminate immediately as of the date such is received.

COVERAGES

The following coverages have the same effective date of [DATE D'EFFET]

Description	Benefit(s)	Modal Premium
Emma life insurance term 100	[MONTANT]	[PRIME]
Emma life insurance term 20 renewable and convertible	[MONTANT]	[PRIME]
Dependent child life insurance	[MONTANT]	[PRIME]

Your monthly payment, due on the [DAY] day of each month, is [PRIME MENSUELLE]

This policy is guaranteed to be renewable up to age 80 as provided for in the policy.

Final Conversion Date:

Policy Termination Date:

Authorized signature:

Cathy Leclair
Director, Individual Insurance

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Part A – Definitions

WHEN USED IN THIS POLICY, THE TERMS LISTED BELOW MEAN:

ACCIDENT (OR ACCIDENTAL): an event that occurs white the Policy is in force and whose cause is external, violent, sudden, fortuitous and beyond the Life Insured's control. If an Accident results in a loss that first appears over ninety (90) days after the Accident, that loss is considered to be the result of Sickness.

BENEFICIARY: a natural or legal person designated by the Policyowner, in any written notice filed with the Insurer, as being entitled to receive benefits under this Policy.

CARE OF A PHYSICIAN: regular and persona! care that is provided by a Physician and that, based on current medical standards, is appropriate for the condition underlying the Life Insured's Disability.

INJURY: bodily Injury resulting directly or indirectly from an Accident sustained by the Life Insured and independently of any Sickness or other cause, white the Policy is in force.

INSURER: Humania Assurance Inc., whose head office is located at 1555 Girouard Street West, Saint-Hyacinthe, Quebec, J2S 2Z6.

LIFE INSURED: The person designated as such in the application.

NON-SMOKER: a person who has not used tobacco in any form whatsoever, including cigarettes, electronic cigarettes or in a vape, nicotine products, nicotine substitutes, cigarillos, small cigars, more than 12 large cigars, in the twelve (12) months before signing the application for insurance or reinstatement.

PHYSICIAN: any person legally authorized to practice medicine in Canada within the scope of his or her medical degree (M.D.), and who does not have a family or business relationship with the Life insured or the Policyowner.

POLICY: the present contract, the application for this Policy, any application for reinstatement and any written request for change to the contract.

POLICYOWNER: the person who owns this Policy.

RISK CLASS: the characteristics of the Life Insured that determine the premium rate for a coverage. Risk Classes are based on the Life Insured's gender, age, tobacco use and health.

SICKNESS: a deterioration of health or a disorder of the body confirmed by a Physician, that is not caused by an Injury and whose first symptoms appear white this Policy is in force.

Work: means the gainful or remunerative occupation(s), employment or Work performed by the Life Insured when the Disability begins.

Part B – Term 100 Life Insurance Benefit

BENEFITS

When a *person insured* 's death does not result from or is not directly or indirectly related to a sickness, the *Insurer* will pay, while the coverage is in effect, the life benefit shown in the Schedule of Benefits subject to the limitations and exclusions of the *policy*.

When the death of the *person insured* results from or is directly or indirectly related to a *sickness*, and that death occurred more than twenty-four (24) months following the effective date of this *policy* or its reinstatement, the *Insurer* will pay, while the coverage is in effect, the life benefit shown in the Schedule of Benefits subject to the limitations and exclusions of the *policy.*

No benefit for life insurance will be payable during the twenty-four (24) month period following the effective date of this *policy* or its reinstatement if the death of the *person insured* results from or is directly or indirectly related to a *sickness*. In such an event, the *Insurer*'s liability will be limited to a refund of the premiums paid and this *policy* will terminate with no further value.

Exclusions

No death benefit is payable if the Life Insured commits suicide within two (2) years of the effective date of coverage or reinstatement of this Policy, whether he or she is sane or insane.

No benefits will be payable if the claim results directly or indirectly from the insured's participation in any of the following activities or sports:

- Mountain climbing;
- Ice climbing;
- Scuba diving (other than at a vacation resort);
- Paragliding;
- Parasailing;
- Hang gliding;
- Skydiving;
- Bungee jumping;
- Heli-skiing;
- Backcountry skiing;
- Backcountry snowmobiling;
- Aviation (except for commercial pilots on scheduled flights);
- Motor racing;
- Kitesurfing.

This exclusion applies even if the above activities are undertaken recreationally, under supervision, or with a certified instructor.

PREMIUM

The initial premium is guaranteed for a period of 100 years. The premium for this coverage is indicated in the Summary of Coverages. The premium is fixed and payable until the date of the Policy anniversary nearest to the Life Insured's one hundredth (100th) birthday. Thereafter, the coverage remains in force and future premiums will be waived.

TERMINATION OF COVERAGE

In addition to the terms of this Policy's General Provisions, this Life Insurance coverage terminates at the earliest of the following dates:

- the date a written request from the Policyowner is received by the Insurer, stating that he wishes to terminate this Life Insurance coverage or the date stipulated in that request, if such date is later than the date of receipt by the Insurer;
- the date on which the Life Insured dies.

GENERAL PROVISIONS

The definitions, limitations and exclusions of this benefit apply in addition to those indicated in the General Provisions. The General Provisions of the Policy govern this coverage when they are relevant to and compatible with its terms.

Part B – Term Life Insurance Benefit

Term 20 Renewable up to 80 years and Convertible up to 65 years

Benefits

When a *person insured* 's death does not result from or is not directly or indirectly related to a sickness, the *Insurer* will pay, while the coverage is in effect, the life benefit shown in the Schedule of Benefits subject to the limitations and exclusions of the *policy*.

When the death of the *person insured* results from or is directly or indirectly related to a *sickness*, and that death occurred more than twenty-four (24) months following the effective date of this *policy* or its reinstatement, the *Insurer* will pay, while the coverage is in effect, the life benefit shown in the Schedule of Benefits subject to the limitations and exclusions of the *policy*.

No benefit for life insurance will be payable during the twenty-four (24) month period following the effective date of this *policy* or its reinstatement if the death of the *person insured* results from or is directly or indirectly related to a *sickness*. In such an event, the *Insurer*'s liability will be limited to a refund of the premiums paid and this *policy* will terminate with no further value.

Exclusions

No death benefit is payable if the Life Insured commits suicide within two (2) years of the effective date of coverage or reinstatement of this Policy, whether he or she is sane or insane.

No benefits will be payable if the claim results directly or indirectly from the insured's participation in any of the following activities or sports:

- Mountain climbing;
- Ice climbing;
- Scuba diving (other than at a vacation resort);
- Paragliding;
- Parasailing;
- Hang gliding;
- Skydiving;
- Bungee jumping;
- Heli-skiing;
- Backcountry skiing;
- Backcountry snowmobiling;
- Aviation (except for commercial pilots on scheduled flights);
- Motor racing;
- Kitesurfing.

This exclusion applies even if the above activities are undertaken recreationally, under supervision, or with a certified instructor.

Premium

The premium for this coverage is indicated in the Summary of Benefits. Renewal premiums are indicated in the Renewal Premium Schedule.

Conversion privilege

White this Term life insurance coverage under is in force the Policyowner may request that such coverage be converted without evidence of the Life Insured's insurability, to a non-participating whole life insurance policy with level premiums as designated by the Insurer at that time.

Conditions related to the Conversion Privilege

The life benefit cannot exceed the benefit indicated in the Summary of coverages.

The Conversion Privilege must be exercised prior to the *policy* anniversary following the sixty-fifth (65^{th}) birthday of the *Life Insured.*

The premium for the new Policy shall be based on:

- the *Life Insured's* attained age;
- the rates in use at the date of the conversion; and
- the *Risk Class* of this coverage.

If this coverage is issued with an extra premium or with limitations or exclusions, the converted coverage will also be issued subject to same conditions. All additional coverages or benefits will be subject to satisfactory evidence of insurability.

Termination of coverage

In addition to the terms of this Policy's General Provisions, this Life Insurance coverage terminates at the earliest of the following dates:

- the date a written request from the Policyowner is received by the *Insurer,* stating that he wishes to terminate this Life Insurance coverage or the date stipulated in that request, if such date is later than the date of receipt by the *Insurer;*
- the date at which the entire coverage is converted;
- the date of termination of this coverage, as indicated in the Schedule of Benefits;
- the date on which the *Life Insured* dies.

General Provisions

The definitions, limitations and exclusions of this benefit apply in addition to those indicated in the General Provisions. The General Provisions of the Policy govern this coverage when they are relevant to and compatible with its terms.

Premium Renewal Schedule

Policy Nº:

Insured :

Risk Class :

Benefit :

Modal premium on renewal for the sum insured of :

EFFECTIVE DATE (mm/yyyy)	MODAL PREMIUM (*)

EFFECTIVE DATE (mm/yyyy)	MODAL PREMIUM (*)

Part B – Dependent Child Life Insurance Benefit

Definitions

Dependent child : A Dependent child is a child over whom you exercise parental authority, or would if he or she were a minor, whom you support and who:

- is at least twenty-one (21) years of age; or
- is between twenty-one (21) and twenty-five (25) years of age and is a full-time student; or
- suffers from a significant functional deficiency that occurred before his or her 21st birthday.

In addition, to be eligible the Dependent child:

- must not be married or in a common-law relationship; and
- must not have full-time work; and
- must have a permanent address in Canada; and
- must be covered by the health plan in his or her province of residence.

A Dependent child intending to study abroad must first take all the necessary steps to keep his or her provincial health insurance coverage. If this coverage lapses, the child will no longer be covered by this policy.

A child who is born or legally adopted after this coverage comes into force is automatically covered from the age of fifteen (15) days provided that he or she is discharged from hospital after birth.

Benefit

In the event of the Dependent child's death while this coverage is in force, the Insurer will pay the life benefit of the Child Life Insurance, subject to the limitations and exclusions of the Policy.

For a Dependent child already present by the effective date of the coverage, no life benefit is payable during the twelve (12) months following the effective date of this coverage if death results from a pre-existing condition.

The Insurer's liability will therefore be limited to the refund of premiums paid and the coverage will terminate without value. However, if other dependent children are present, the Policyowner can waive the premium refund. The coverage will therefore remain in force.

If the Dependent child is covered by more than one Child Life Insurance coverage issued by the Insurer, the maximum benefit is then limited to $25,000 for all of these coverages.

Pre-existing condition

A Sickness or a condition that appears during the 12-month period prior to the effective date of the coverage and for which:

- the Dependent child was diagnosed or was treated, hospitalized or attended to by a Physician or other health professional; or
- the Dependent child was advised to seek treatment or consult a Physician or other health professional; or

the Dependent child was given a prescription or took medication, showed signs or symptoms or underwent tests or examinations.

Conversion privilege

As long as this Dependent child's life insurance coverage remains in force, the Policyowner can convert this coverage for the Dependent child, without proof of insurability, to a new non-participating whole life insurance policy with level premiums, as designated by the Insurer at that time, and for which the benefit is equal to a maximum of five (5) times the value of this coverage.

The conversion privilege is only allowed at the following dates:

- within sixty (60) days preceding an event that would make the dependent child no longer meet the definition of dependent child;
- within sixty (60) days preceding the anniversary date of the Policy, closest to the date on which the insured reaches sixty-five (65) years old.

The premium for the new Policy shall be based on:

- the Dependent child's attained age on his or her closest birthday;
- the rates in use at the date of the conversion; and
- the Risk Class of this coverage.

Termination of coverage

- The date on which there is no longer a Dependent child;
- The Policy anniversary date on which the person insured has reached the insurance age of sixty-five (65);
- The date on which the principal coverage terminates;
- The date a written request from the Policyowner is received by the Insurer, stating that he wishes to terminate this Child Life Insurance coverage, or the date stipulated in that request, if such date is later than the date of receipt by the Insurer;
- The date on which the entire coverage is converted for all the life insureds under this coverage.

General exclusions

No death benefit is payable if the Insured or the dependent child commits suicide within two (2) years of the rider's effective date or reinstatement, whether he or she is sane or insane. The following exclusions apply if the waiver of premium or accidental death and dismemberment are covered under the contract.

General provisions

The definitions, limitations and exclusions of this benefit are in addition to those listed in the general provisions of the policy. Please read all the details contained in the text of the policy. In the event of a discrepancy between the policy and this document, the policy will prevail.

Part C – General Provisions

Contract

This Policy is issued by the Insurer based on the application for insurance, a copy of which is attached, as well as on any document subsequently submitted to reinstate or change the Policy. No representative is authorized to change this Policy or to render null any of its provisions.

Any change to the Policy or its riders must be signed by an officer of the Insurer.

EFFECTIVE DATE

This Policy takes effect on the date the Insurer approves the application, provided the application is approved without change, the first premium has been paid, and no change has occurred in the Life Insured's insurability since the application for insurance or reinstatement was signed.

PREMIUMS

The premium of each coverage is indicated in the Schedule of Benefits.

METHOD OF PAYMENT

Premium is payable monthly by automatic pre-authorized withdrawals. A premium paid by cheque or pre-authorized withdrawal is only considered paid if the payment is honoured.

A grace period of thirty (30) days is granted for payment of each premium except the first. If the premium remains unpaid after the grace period, this Policy lapses and all insurance coverage terminates.

The Insurer will deduct outstanding premiums from any amount payable.

Exclusions

No death benefit is payable if the Life Insured commits suicide within two (2) years of the effective date of coverage or reinstatement of this Policy, whether he or she is sane or insane.

Duty to disclose

The Person Insured, the Insured and the Beneficiary are required to cooperate fully with the Insurer and shall disclose to the Insurer in any application, on a medical examination, if any, and in any written statements or answers furnished as evidence of insurability, every fact within the person’s knowledge that is material to the insurance and is not so disclosed by the other. The Person Insured, the Insured and the Beneficiary shall also sign any form or other document allowing the Insurer to obtain any information it deems relevant.

Subject to the provisions dealing with incontestability and age, failure to disclose or a misrepresentation

of such a fact renders a contract voidable by the Insurer.

Age

For the purposes of this Policy, the Life Insured's age is the age attained at their last birthday when a coverage is issued. If, mistakenly or otherwise, the age used to calculate the premium is incorrect, any amount payable by the Insurer will be adjusted to reflect the correct age.

Policy and coverage termination

Unless stipulated otherwise in a given coverage, this Policy and its coverages terminate at the earliest of the following dates:

- the date a written request from the *Policyowner* is received by the Insurer stating that he wishes to terminate this *policy* or the date stipulated in that request, if such date is later than the date of receipt by the *Insurer;*
- the date the grace period for premium payment expires;
- the date of the *Policy* anniversary nearest to the *Life Insured's* eighty (80th) birthday;
- the date the *Life Insured* dies.

Incontestability

In the absence of fraud, the Insurer cannot cancel or reduce a coverage that has been in force for two (2) years or that was reinstated over two (2) years previous because of misrepresentation or concealment with respect to risk.

Misrepresentation concerning smoking habits

If the premium for this Policy is based on statements in the application for insurance or reinstatement to the effect that the Life Insured is a Non-Smoker and those statements are in fact false, those statements will be considered fraudulent, and this Policy will be void from the effective date or reinstatement date. Accordingly, any daim paid by the Insurer must be reimbursed.

Reinstatement

If this Policy terminates because the premium was not paid, it may be reinstated within two (2) years of the date of termination provided the Policyowner requests that it be reinstated, establishes the Life Insured's insurability to the Insurer's satisfaction and pays any outstanding premiums. The periods related to incontestability and suicide apply again as of the date of the last reinstatement.

When the Policy is reinstated within ninety (90) days of the date of cancellation, no proof of insurability is required.

Change of beneficiary

Subject to applicable law, the Policyowner may at any time designate or change a Beneficiary or revoke a Beneficiary designation that is not an irrevocable Beneficiary designation. For a change of Beneficiary to be recognized, the Insurer must receive written notice of that change. The Insurer bears no responsibility with respect to the validity of a Beneficiary designation or any change of Beneficiary.

Participation in the distribution of profits

This Policy is a non-participating Policy, it does not grant any rights to a share of the Insurer's profits.

Notice and proof of claim

All claims must be made in writing and submitted to the Insurer within thirty (30) days of the date of the death of de person insured, giving rise to a claimunder this Policy.

The Insurer may, if permitted under applicable law, require an autopsy and any failure to satisfy that request will give the Insurer grounds to refuse payment of the benefit.

The Policyowner and the Beneficiary are required to cooperate fully with the Insurer by providing all the information it may require and by signing any form or other document allowing the Insurer to obtain any information it deems relevant.

The Policyowner or any person entitled to submit a claim must provide the Insurer with all the documents it may require within ninety (90) days of the date of the death of the person insured.

In the event of a failure to give notice or provide proof within the stipulated periods, the Policyowner or the beneficiary, as applicable, shall not be entitled to receive benefits, with respect to the claim in question, for the period prior to the date on which the Insurer actually receives that proof.

The Policyowner must notify the Insurer of any change of address for the purpose of facilitating correspondence and the transmission of any document.

Payment under the policy

Death benefits will be paid to the Beneficiary designated in the application or in any other document subsequently submitted to the Insurer by the Policyowner.

If the Policyowner has not designated a Beneficiary, the death benefit will be payable to the Policyowner or the Policyowner's estate.

Reimbursement

No cheque in reimbursement of premiums will be issued for amounts of less than twenty dollars ($20).

Legal currency

Any payment under the provisions of this Policy will be made in the legal currency of Canada.

Right to cancel

The Policyowner may obtain cancellation of this Policy, within fifteen (15) days after receipt thereof. When a written and signed cancellation request is received by Humania Assurance within these periods, any premium collected under the contract will be reimbursed to the Policyowner.

Termination of this policy or any of its benefits

The policyholder may cancel this policy or any of its benefits at any time by sending a written request to Humania Assurance.

If your last monthly Premium was paid by its due date, the effective date of your cancellation will be the Monthly Processing Day following the date we receive your request to cancel. If your last monthly Premium was not paid by its due date and remains outstanding, the effective date of your cancellation will be the date we receive your written request to cancel.

If your premium payment frequency is annual, the effective date of your cancellation will be the Monthly Processing Day following the date we receive your request to cancel, and we will refund the unused portion of your annual Premium.

Cash value

This Policy does not have any cash-value.

Compliance with law

Any provision of the Policy that, at the effective date, does not comply with legislation of the province or territory in which the Policy was issued is amended to meet the minimum requirements of such legislation.

General provisions

The exclusions, limitations and General Provisions apply to the Policy as well as to all coverages when they are relevant.

Some coverages contain exclusions and limitations specific to those coverages. These exclusions and limitations apply in addition to the exclusions and limitations of the General Provisions.