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# GROUP PERSONAL ACCIDENT INSURANCE COVER

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Issued to

M/S EMIRATES MOTORSPORTS ORGANIZATION  
GIP – 20914



Issued by





**POLICY NO. GIP – 20914**

**EFFECTIVE DATE: 1.1.2026**

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**TYPE** Group Personal Accident and Emergency Medical and Repatriation Expenses

**INSURER** Alliance Insurance (PSC)

**Address:**

Warba centre,  
Abu Baker al Siddique Street,  
Dubai, 5501  
United Arab Emirates

**ORIGINAL INSURED** Emirates Motorsport Organization – EMSO

**Address:**

Al Wuheida Street,  
PO Box 5078  
Dubai  
United Arab Emirates

**PERIOD** From: 01<sup>st</sup> January 2026  
To: 31<sup>st</sup> December 2026  
Both dates inclusive local standard time at the above address of the insured.

**BUSINESS OF THE INSURED:** Motorsport events



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**INSURED PERSONS:**

Category A)

Competition Licence holders whilst signed on under the regulations for Competitors issued by the Assured or any International or National Event held in accordance with the International Sporting Codes of the Federation Internationale de L'Automobile (FIA) and Federation Internationale de Motorcyclisme (FIM).

Category B)

Officials on duty during affiliated activities at all venues, whilst 'signed-on' under the regulations, issued by the Assured, or any International or National Event held in accordance with the International Sporting Codes of the Federation Internationale de L'Automobile (FIA) and Federation Internationale de Motorcyclisme (FIM) for those events held at the Dubai Autodrome this policy will be in excess of all other valid and collectable insurances.

Insured Persons shall also include members of the Association of Racing Kart Schools and other Training Associations whilst participating as an Official for and on behalf of the Assured.

Cover shall also apply whilst an Insured Person is travelling directly to and from their normal place of residence.

Category C)

Overseas competitors participating or taking part in events organised and managed by the insured

**BENEFICIARY:**

Insured Person(s) or the insured person(s) estate in the event of accidental death

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1	Accidental Death With the exception of those under the age of 16	AED 300,000 AED 45,000
2	Loss of two limbs or the sight of two eyes or loss of one limb and the sight of one eye	AED 90,000
3	Permanent Total Disablement	AED 300,000
4	Loss of one limb or the sight of one eye	AED 45,000
5	Temporary Total Disablement	Not covered
6	Incapacitation meaning bedridden and requiring fulltime Care for more than 5 years	AED 300,000
7	Loss of Speech and hearing	AED 265,000
8	Broken Bone	AED 1,500 per arm and leg and AED 300 for all other broken bones up to AED 3,000 anyone accident
9	Accident & Sickness Emergency Medical and Repatriation Expenses	AED 90,000 excess of AED 15,000/-

**Category B:**

1	Accidental Death	AED 740,000
2	Loss of two limbs or the sight of two eyes or loss of one limb and the sight of one eye	AED 445,000
3	Permanent Total Disablement	AED 740,000
4	Loss of one limb or the sight of one eye	AED 22,500
5	Temporary Total Disablement	Not covered
6	Loss of Speech and hearing	AED 450,000
7	Broken Bone	AED 1,200 per arm and leg and AED 500 for all other broken bones
8	Hospitalization	AED 600 per day up to AED 4,500 any one accident
9	Accident & Sickness Emergency Medical and Repatriation Expenses	AED 90,000 excess of AED 15,000/-



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Category C:

1	Overseas Competitors - Accident & Sickness Emergency Medical and Repatriation Expenses	AED 626,000
	Excess each and every overseas competitor	AED 4,170

**OPERATIVE LIMITS:**

Category A: 24/7

Category B: Occupational only – including commuting to/ from

Category C: Overseas competitors whilst in country at Insured Organization event

**TERRITORIAL LIMITS:**

Worldwide – Excluding Russia, Ukraine, Belarus, Iran, North Korea



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**INSURANCE CONDITIONS**

For the purposes of this Reinsurance, the attached wording shall be deemed to be a copy of the wording of the Original Policy and, in the event of any discrepancy between the actual Original Policy and the wording attached hereto, the terms of the latter shall prevail.

Subject to the following reinsurance conditions:

- 1) Losses to be notified to Reinsurers via Cogent International Ltd or via the nominated TPA in event of Medical or Repatriation Claims:

[Northcott Global Solutions Ltd](#)

Tel: +44 (0)207 183 8910

Back up Mobile: +44(0) 7785627433

Email: [ops@northcottglobalsolutions.com](mailto:ops@northcottglobalsolutions.com)

- 2) Cover ceases when the member leaves the group
- 3) Automatic Additions and Deletions on Pro-rata basis
- 4) Cover ceases after a Permanent Total Disablement or Death Claim.
- 5) Maximum Benefit payable under Section A not to exceed AED 300,000 in all, Any One accident
- 6) Maximum Benefit payable under Section B not to exceed AED 740,000 in all, any one accident
- 7) Maximum benefit payable under Section C not to exceed AED 626,000 in all any one accident
- 8) All claims or circumstances which may potentially lead to a claim must be notified promptly.
- 9) If the insured shall make a claim knowing the same to be false or fraudulent as regards amount or otherwise, this Contract shall become void and all claims hereunder shall be forfeited.
- 10) LMA3100A Sanctions Limitation Clause as attached.
- 11) LMA5415 Cyber Risks Endorsement (Personal Accident & Illness), as attached.
- 12) Accumulation Limit: AED 5,000,000 any one event
- 13) The Insured confirms it understands the English Language and accepts an English Language Policy.
- 14) NMA2582B Limited War Exclusion – as attached
- 15) LSW1176 Nuclear, Chemical, Biological Terrorism Exclusion – as attached
- 16) In the case of any differences between the attached wording and the locally issued direct insurance wording, the attached wording shall prevail
- 17) NMA2738 Claims Control Clause



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<b>EXPRESS WARRANTIES</b>	None, other than as may exist elsewhere in this Contract or in any attached clauses. Nothing in this Contract shall be construed as a warranty unless it is expressly stated as such.
<b>CONDITIONS PRECEDENT</b>	None, other than as may exist elsewhere in this Contract or in any attached clauses. Nothing in this Contract shall be construed as a condition precedent unless it is expressly stated as such.
<b>RECORDING, TRANSMITTING &amp; STORING INFORMATION</b>	The Insurer and Reinsurer may maintain all files in relation to this contract electronically.



**Group Personal Accident and Accident and Sickness  
Medical and Repatriation Expenses Reinsurance**

**Definitions**

1. **Bodily Injury** means identifiable physical injury which:
  - a. is caused by an **Accident**; and
  - b. solely and independently of any other cause, except illness directly resulting from. or medical or surgical treatment rendered necessary by such injury, occasions your death or disablement within twelve months from the date of the Accident.
2. **Accident** means a sudden, unexpected, unusual, specific event which occurs at an identifiable time and place during the Period of Insurance:

Accident shall also mean:

  - a. exposure resulting from a mishap to a conveyance in which you are traveling.
  - b. if you disappear during the period of this Insurance and your body is not found within twelve months after your disappearance, and we are satisfied that you sustained Bodily Injury and that such injury resulted in your death, we will pay any death benefit, where applicable under this Insurance, provided that the person or persons to whom such sum is paid shall sign an undertaking to refund such sum to us if you are subsequently found to be living.
3. **Illness** means sickness or disease which first manifests itself during the Period of Insurance and occasion your total disablement within twelve months after first manifesting.
4. **Permanent Total Disablement** means disablement which entirely prevents you from attending to any business or occupation for which you are reasonably suited by training, education or experience and which lasts twelve months and which, at the end of that period, is beyond hope of improvement.
5. **Loss of Limb** means permanent loss by physical separation of a hand and or above the wrist or of a foot at or above the ankle and includes permanent total and irrecoverable loss of use of hand, arm or leg.
6. **We, us, our** means Insurance Company
7. **You, your** means an Insured Person detailed in the schedule.
8. **Terrorism** means any act or acts of force and/or violence.
  - a) for political, religious or other ends; and/or
  - b) directed towards the over-throwing or influencing of the Government de jure or de facto; and/or
  - c) for the purpose of putting the public in any part of the public in fear by any person or persons acting alone or on behalf of or in connection with any organisation
9. **Hospitalisation** means admission to a Hospital as an in-patient for a period of 24 hours or more on the advice of, and under the constant supervision, of a Qualified Medical Practitioner.



10. **Hospital** shall mean an establishment which either exists primarily for the diagnosis, medical care and treatment of sick or injured people on an In-patient basis under the supervision of Qualified Medical Practitioner(s) one or more of whom is available for consultation at all times;

- provides (where appropriate) facilities for major surgery within the confines of the establishment or in facilities controlled by the establishment;
- provides full-time nursing service by and under the supervision of nursing staff.
- 'Hospital' shall not include a special unit in a hospital or a place existing primarily: for the treatment of psychiatric disease or sub normality; for the care of the aged, drug addicts or alcoholics; as a health hydro or nature cure clinic, a nursing or convalescent home, extended care facility, rest home or hospice

11. **In-patient** means you have gone through the full admission procedure and a clinical case record has been opened and your admission is necessary for the medical care and treatment of Bodily Injury and not merely for any form of nursing, convalescence, rehabilitation, rest or extended care.

12. **Broken Bone(s)** means a complete fracture of one or more of the bones as stated in the Schedule.

13. **Loss of Speech** means the total and permanent loss of speech.

14. **Loss of Hearing** means total and irrecoverable deafness confirmed by audiometer and sound threshold tests.

#### **Exclusions**

This Insurance does not cover death or disablement in any way caused, or contributed to, by

1. War, whether was be declared or not, hostilities or any act of was or civil war.
2. Radioactive contamination.
3. **You** engaging in or taking part in armed forces service or operations.
4. **Your** suicide or attempted suicide, intentional self-injury, you being in a state of insanity or your willful exposure to needless peril other than in an attempt to save human life.
5. **Your** deliberate exposure to exceptional danger (except in an attempt to save human life).
6. **Your** own criminal act.
7. **You** being:
  - a. Under the influence of alcohol, as defined by the motor vehicle laws of the country or state of their normal domicile;
  - b. Under the influence of drugs, unless prescribed for you by a qualified practitioner but excluding any drugs prescribed for the treatment of drug addiction.



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8. **Terrorism** including, without limitation, contemporaneous or ensuing Bodily Injury and/or Illness and/or Medical Expenses caused by fire and/or looting and/or theft.

In any claim and in any action, suit or other proceedings to enforce a claim under this insurance the burden of providing that such claims do not fall within the terrorism exclusion set out above shall be upon the Assured.

9. **Illness** of any kind

#### **Conditions**

1. Unless otherwise declared and agreed by us no benefit will be payable for any condition for which you have sought advice, diagnosis, treatment or counselling or of which you were, or should reasonably have been, aware at inception of this Insurance or for which you had been treated at any time prior to inception.
2. Notice must be given to us as soon as reasonably practicable of any Accident which causes or may cause a claim within the meaning of this Insurance, and you must as early as possible seek the attention of a duly qualified medical practitioner. Notice must be given to us as soon as reasonably practicable in the event of the death of the Insured Person resulting or alleged to result from an Accident.

All medical records, notes and correspondence referring to the subject of a claim or a related pre-existing condition shall be made available on request to any medical adviser appointed by us or on our behalf and that such medical adviser shall, for the purpose of reviewing the claim, be allowed so often as may be deemed necessary to make an examination of you.

3. Any fraud, concealment or deliberate mis-statement by you, if unknown to the Assured, either in the proposal on which this Insurance is based or in relation to any other matter affecting this Insurance or in connection with the making of any claim hereunder shall render this Insurance null and void in so far as it related to you in question but any such fraud, concealment or deliberate mis-statement by or known to the Assured shall render the whole Insurance null and void and all claims hereunder shall be forfeited.
4. This Insurance may be cancelled at any time at the request of the Assured in writing to the Broker who effected the Insurance.

This Insurance may also be cancelled by us or on our behalf by giving thirty (30) days' notice in writing to the Assured at his last known address.

Notice shall be deemed to be duly received in the course of post if sent by pre-paid letter and post properly addressed.



**ACCIDENT & SICKNESS EMERGENCY MEDICAL  
and REPATRIATION EXPENSES EXTENSION**

**Sum Insured:** AED 90,000/- **Excess:** AED 15,000/-

In the event of the Insured Person sustaining Accidental Bodily Injury or Illness which manifests itself during the Period of Insurance this Insurance to pay up to the Sum Insured in respect of reasonable and necessary medical and surgical charges, specialist's fee, hospital, nursing home and nursing attendance charges, physiotherapy, massage and manipulative treatment costs, the cost of surgical and medical requisites and the cost of any necessary repatriation which shall include, in the case of the death of the Insured Person, reasonable funeral expenses and expenses incurred in repatriating the body or ashes and costs incurred in making the necessary arrangements.

Repatriation shall be considered necessary if a qualified medical practitioner

- I. Shall estimate that the Insured Person is likely to be totally disabled for a period in excess of 4 weeks and/or
- II. Shall certify that local facilities are inadequate for the treatment of the Insured Person's condition and/or
- III. Shall confirm that the Insured Person's recovery will be substantially expedited by repatriation

**EXCLUSIONS:**

Underwriters shall not be liable for

1. the first amount of each and every claim shown above as "Excess"
2. rest cures, sanatorium or custodial care or periods of quarantine or isolation
3. cosmetic or plastic surgery not necessitated as a result of accidental bodily injury
4. dental examinations, X-rays, extractions, filings and general dental care except as a result of accidental bodily injury; supplying of or fitting of eye glass or hearing aids except as a result of accidental body injury
5. routine medical examinations
6. expenses incurred, whether for treatment or diagnosis or counselling, directly or indirectly arising out or consequent upon or contributed to by Acquired Immune Deficiency Syndrome(AI.D.S) or AI.D.S Related Complex (AR.C.)
7. any medical or physical condition which originated prior to the commencement date of this Insurance
8. pregnancy, childbirth, miscarriage or any disorder of the reproductive system
9. expenses incurred in the Insured Person's Country of Domicile unless a qualified Medical Practitioner shall confirm that the Insured Person's recovery will be substantially expedited by the incurring of such expenditure and in any event, expenses incurred in the Insured Person's Country of Domicile which are recoverable under any Private Medical Insurance held by or for the benefit of the Insured Person.
10. costs incurred more than 12 months after the date of the event giving rise of them
11. repatriation costs not authorised by the Emergency Assistant Service. Subject otherwise to the terms, conditions and limitations of this Insurance



#### **Medical Emergency Assistance**

The **Assured** and **Insured Persons** should use the services of Northcott Global Solutions Group Services (the **Assistance Company**) fully for all emergency matters, including medical emergency matters, in-patient hospital treatment and repatriation.

The **Assistance Company** will be solely responsible for all decisions on the most suitable practical and reasonable solution to a problem, and all such assistance is subject to the prior approval of the **Assistance Company**:

#### **MEDICAL EMERGENCY ASSISTANCE** provided by **NORTHCOTT GLOBAL SOLUTIONS**

The **Assured** and **Insured Persons** should use the services of the following named assistance company to the full for all emergency matters, medical emergency matters, in-patient hospital treatment and evacuation/repatriation. The assistance company will be solely responsible for all decisions on the most suitable practical and reasonable solution to any problem, and all such assistance is subject to the prior approval of said assistance company:



#### **Northcott Global Solutions Ltd**

Tel: +44 (0)207 183 8910

Back up Mobile: +44(0) 7785627433 Email: [ops@northcottglobalsolutions.com](mailto:ops@northcottglobalsolutions.com)

Northcott Global Solutions Ltd (NGS) may be contacted at any time, should the **Insured Person** require advice or assistance regarding all emergency matters. In the event of an **Insured Person** requiring in-patient hospital treatment and/or evacuation/repatriation, it is imperative that NGS is contacted and authorisation obtained prior to such treatment and/or evacuation/repatriation taking place.

NGS must be informed that this Contract covers the person concerned and the following details must be provided: The **Assured**'s name and address.

The **Insured Person**'s name, location and detail (including passport/visa etc).

The Contract of Insurance number shown in the **Risk Details** of the Market Reform Contract.

The name and phone number of the doctor and hospital treating the **Insured Person**. The **Period of Insurance** shown in the **Risk Details** of the Market Reform Contract. The nature of the emergency.

Failure to contact NGS and obtain authorisation may prejudice the claim and could mean that some or all of the costs involved may not be paid. The Assured and the Insured Person should not attempt to find their own solution and then expect full reimbursement from the Underwriters without prior approval first having been obtained from the NGS Limited.

In the event that liability cannot be established at the outset of an emergency it is agreed that the first named insured will guarantee payment until such time that liability can be accepted by insurers.

**PREMIUM PAYMENT CLAUSE**

Notwithstanding any provision to the contrary within this contract or any endorsement hereto, in respect of non payment of premium only the following clause will apply.

The (Re)Insured undertakes that premium will be paid in full to (Re)Insurers within 30 days of inception of this contract (or, in respect of instalment premiums, when due).

If the premium due under this contract has not been so paid to (Re)Insurers by the 30th day from the inception of this contract (and, in respect of instalment premiums, by the date they are due) (Re)Insurers shall have the right to cancel this contract by notifying the (Re)Insured via the broker in writing. In the event of cancellation, premium is due to (Re)Insurers on a pro rata basis for the period that (Re)Insurers are on risk but the full contract premium shall be payable to (Re)Insurers in the event of a loss or occurrence prior to the date of termination which gives rise to a valid claim under this contract.

It is agreed that (Re)Insurers shall give not less than 30 days prior notice of cancellation to the (Re)Insured via the broker. If premium due is paid in full to (Re)Insurers before the notice period expires, notice of cancellation shall automatically be revoked. If not, the contract shall automatically terminate at the end of the notice period.

If any provision of this clause is found by any court or administrative body of competent jurisdiction to be invalid or unenforceable, such invalidity or unenforceability will not affect the other provisions of this clause which will remain in full force and effect.

LSW3001 30/9/08

**CLAIMS CONTROL CLAUSE**

Notwithstanding anything to the contrary contained in this Reinsurance it is a condition precedent to Reinsurers' liability under this Reinsurance that:

a) The Insured shall give to the Insurer(s) written notice as soon as reasonably practicable of any claim made against the insured in respect of the business reinsured hereby or of its being notified of any circumstances which could give rise to such a claim.

b) The insured shall furnish the insurer(s) with all information known to the insured in respect of claims or possible claims notified in accordance with (a) above and shall thereafter keep the Reinsurer(s) fully informed as regards all developments relating thereto as soon as reasonably practicable.

c) The insurer(s) shall have the right at any time to appoint adjusters and/or representatives to act on their behalf to control all investigations, adjustments and settlements in connection with any claim notified to the insurer(s) as aforesaid.

d) The insured shall co-operate with the insurer(s) and any other person or persons designated by the insurer(s) in the investigation, adjustment and settlement of such claim.

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**SANCTIONS LIMITATION CLAUSE**

No (re)insurer shall be deemed to provide cover and no (re)insurer shall be liable to pay any claim or provide any benefit hereunder to the extent that the provision of such cover, payment of such claim or provision of such benefit would expose that (re)insurer to any sanction, prohibition or restriction under United Nations' resolutions or the trade or economic sanctions, laws or regulations of the European Union, United Kingdom or United States of America.

LMA3100A  
5 October 2023

**AUTOMATIC ADDITIONS AND DELETIONS CLAUSE**

Additions and deletions of Insured Persons shall be automatically included in this Insurance but for not more than the highest Sum Insured for the respective Section in the Schedule of Benefits in respect of any additions. The Insured must give notice of all additions and deletions to Underwriters on a quarterly basis or as otherwise agreed by Underwriters and provided for herein. Any premium adjustment for such additions or deletions shall be calculated and payable at the expiration of this insurance. In the event of a claim where the Insured Person is not listed on the Original Schedule of Insured Persons, the Insured must prove that auditable records are in place demonstrating that the Insured Person was contracted and covered under this policy of Insurance.

**LIMITED WAR EXCLUSION CLAUSE**

Notwithstanding anything to the contrary contained herein, this Insurance does not cover loss consequent on:

- a) War, whether declared or not, between any of the following countries, namely, China, France, the United Kingdom, the Russian Federation and the United States of America, or
- b) War in Europe, whether declared or not other than:
  - Civil War,
  - Any enforcement action by or on behalf of the United Nations

In which any of the countries stated in a) above or any armed forces thereof are engaged

14/05/2002

NMA2582b

**NUCLEAR/CHEMICAL/BIOLOGICAL TERRORISM EXCLUSION:**

It is agreed that, regardless of any contributory cause(s), this reinsurance does not cover any claim(s) in any way caused or contributed to by an act of terrorism involving the use or release or the threat thereof of any nuclear weapon or device or chemical or biological agent.

For the purpose of this exclusion an act of terrorism means an act, including but 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 organisation(s) or government(s), committed for political, religious, ideological or ethnic purposes or reasons including the intention to influence any government and/or to put the public, or any section of the public, in fear.

If the reinsurers allege that by reason of this exclusion any claim is not covered by this reinsurance the burden of proving the contrary shall be upon the reassured.

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**VALUE ADDED TAX “VAT” CLAUSE: -**

It is hereby declared and agreed that the Value Added Tax (VAT) of (5%) is applicable on insurance premiums and other charges payable/paid in relation to this insurance policy retrospectively from inception or prospectively from the date of implementation of VAT, the Insurer reserves its right to collect the same from the Insured in line with the VAT laws and regulations as implemented in the UAE.

**ALLIANCE INSURANCE CONTACT DETAILS**

**For Claims:**

Anish Kumar B | Senior Claims Executive  
Policy Holder Service Department | Alliance Insurance P.S.C | 205, 2nd Floor, Warba Centre | P.O. Box 5501 |  
Dubai | United Arab Emirates  
(+971 4 6051 215 2 +971 4 6051 112 \* [anish.kumar@alliance-uae.com](mailto:anish.kumar@alliance-uae.com))

Enosh Perera | Claims & Operations Executive  
Life Department | Alliance Insurance P.S.C | 205, 2nd floor, Warba Centre | P.O. Box 5501 | Dubai | United Arab Emirates  
(+971-4-6051-233 | [enosh.perera@alliance-uae.com](mailto:enosh.perera@alliance-uae.com))

**For Operations:**

Sundar S | Underwriting Manager  
Life Department | Alliance Insurance P.S.C | 203, 2nd floor, Warba Centre | P.O. Box 5501 | Dubai | United Arab Emirates  
(+971 4 6051 252 2 +971 4 6051 240 Mob: 052 8400 308 \* [glpa@alliance-uae.com](mailto:glpa@alliance-uae.com))

Sharon Teodoro | Senior Underwriter-Life  
Group Life & PA | Alliance Insurance P.S.C | 205, 2nd floor, Warba Centre | P.O. Box 5501 | Dubai | United Arab Emirates  
(+971 4 6051 231 2 +971 4 6051 112 \* [sharon.teodoro@alliance-uae.com](mailto:sharon.teodoro@alliance-uae.com))

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