# **Tournament Refund**

# **Registration Cancellation Insurance**

Description of Coverage



# **How it Works**

- With this Registration Cancellation insurance, you may be reimbursed the cost of the non-refundable, unused team Registration Fee, less any Refunds, if the team is unable to attend the tournament for which it has registered as the result of any of the covered reasons listed below.
- In order for reimbursement to be payable, the entire team must withdraw from the tournament for which it has registered prior to the tournament start date.
- The maximum amount recoverable is the team Registration Fee paid, up to \$5,000.

# **Covered Reasons**

- A rostered team member suffers a **serious injury or unforeseen serious Illness** that prevents the team from being able to participate in the tournament. The rostered team member must be examined by a Physician within 72 hours of the cancellation and the Physician must advise them not to attend the tournament.
- A rostered team member's Family Member suffers a **serious Injury or unforeseen serious Illness** that is life threatening or requiring hospitalization. The rostered team member's Family Member must be examined by a Physician within 72 hours of the cancellation.
- The death of one of a rostered team member's Family Members
- Having a rostered team member's personal leave revoked while on Active Military Duty (except for disciplinary reasons)
- A rostered team member involved in a traffic accident that damages their vehicle on the day of the tournament, requiring them to immediately repair it to ensure safe operation of the vehicle
- A rostered team member involved in a **traffic accident while** en route to a departure on a common carrier and consequently miss their transportation to the tournament, provided that the transportation was scheduled to depart no more than 48 hours prior to the tournament, and the common carrier was unable to accommodate them on later transportation which would arrive in time to the tournament.

# What's Not Covered

No claim will be payable as a result of any of the following:

- 1. Pre-Existing Conditions\*
- 2. Intentionally self-inflicted harm, suicide or attempted suicide;
- 3. Normal Pregnancy (unless specifically covered), fertility treatments, Childbirth or elective abortion, other than unforeseen complications of a rostered team member or a Family Member's pregnancy;

4. Mental or nervous health disorders, including but not limited to: anxiety, depression, neurosis or psychosis; or physical complications related thereto of a rostered team member or a Family Member; 5. Alcohol or substance abuse; or conditions or physical complications related thereto of a rostered team member or a Family Member;

6. War (whether declared or undeclared), acts of war, military duty (unless specifically covered), civil disorder, or unrest;

- 7. Operating or learning to operate any aircraft as pilot or crew;
- 8. Nuclear reaction, radiation or radioactive contamination;
- 9. Natural Disasters (unless as specifically covered);
- 10. Terrorism;
- 11. Financial Default;
- 12. Epidemic or Pandemic;
- 13. Pollution or threat of pollutant release;

14. Any unlawful acts committed by a rostered team member or Family Members, whether they are insured or not;

15. a) making changes to personal plans or b) having a business or contractual obligation unless as covered herein;

16. The tournament being cancelled or delayed by the venue or promoter for any reason (including bad weather) unless as covered herein;

- 17. Prohibition or regulation by any government;
- 18. Lost or stolen Tickets;

19. Dental treatment except as a result of an Accidental Injury to sound natural teeth;

20. Participating in skydiving; hang gliding; parachuting; mountaineering where ropes or guides are normally used; racing by horse, motor vehicle, or motorcycle; bungee cord jumping; deep sea diving; spelunking or caving; heli-skiing; extreme skiing; rock climbing;

21. Participation as a professional athlete;

22. Participation in any military maneuver or training exercise, police service, or any loss while a rostered team member is in the service of the armed forces of any country. Orders to active military service for training purposes of 2 months or less will not constitute service in the armed forces;

23. Accidental Injury or Sickness when traveling against the advice of a Physician;

24. Venereal disease or syphilis or other sexually transmitted disease;

25. Tuberculosis, Severe Acute Respiratory Syndrome or other chronic airborne pathogen;

26. Your participation in civil disorder, riot or a felony; or

27. Any expected or foreseeable events.

\*Pre-Existing Conditions means a rostered team member or their Family Member's Injury or Sickness within the 90-day period immediately preceding the Policyholder's Policy Effective Date:

- 1. For which medical advice, diagnosis, care, or treatment was recommended or received by a Physician; or
- That required taking prescription drugs or medicines, unless the condition for which the drugs or medicines are taken remains controlled without any change in the required prescription drugs or medicines.

# How to File a Claim

Please call the Claims Intake Line at battleface, at **855-425-7911** within 20 days after a covered reason.(Be sure to have your policy number handy!)

## Have questions?

For more information or general inquiries, please contact our administrator, battleface Insurance. Call Toll-Free: **855-998-2928** Email: usa@battleface.com

## **Eligibility & Additional Terms**

This is a brief description of coverage provided under policy form series SI-25000P and SI-25010AE underwritten by StarNet Insurance Company (domiciled in Iowa - California Certificate of Authority #6978) 2445 Kuser Road, Suite 201, Hamilton Square, NJ 08690 and is subject to the terms, conditions, limitations and exclusions of the policy. Please see the policy for complete details. Coverage terms, conditions, limitations and exclusions may vary or may not be available in all states.

Capitalized terms used in this Description of Coverage are defined in the policy. Coverage under the policy is primary.

The insurance described in this document provides limited benefits. Limited benefit plans are insurance products with reduced benefits intended to supplement comprehensive health insurance plans. This insurance is not an alternative to comprehensive coverage. It does not provide major medical or comprehensive medical coverage and is not designed to replace major medical insurance. Further, this insurance is not minimum essential coverage as set forth under the Patient Protection and Affordable Care Act.

### **Licensed Supervising Producers:**

TRAVMARK.com, Inc 11 Overbrook Raod, Upper Saddle River, NJ 07458 917-842-2292. NJ license number 1088145 / California license number 0196377. battleface Insurance Services, LLC 45 East Lincoln Street, Columbus, OH 43215 855 998-2928. Ohio license number 1352365 / California license number 0M75381.

# Important COVID-19 Coverage Information

## How is COVID-19 Covered:

The Registration Cancellation policy includes coverage that **reimburses the cost of the non-refundable**, **unused team registration fee if the team** is unable to attend the tournament for which it has registered as a result of any serious Injury or any unforeseen serious Illness occurring to any rostered team member. Unforeseen serious illness includes illness related to a rostered team member's positive COVID-19 diagnosis provided that the positive COVID-19 diagnosis was received after the effective date of the Registration Cancellation coverage.

In order for reimbursement to be payable: 1. the entire team must withdraw from the tournament for which it has registered prior to the tournament start date, and 2. the affected team member must be examined by a physician within 72 hours of the cancellation, and 3. the physician must have advised the affected team member not to participate in the tournament due to the positive COVID-19 diagnosis.

The Epidemic or Pandemic exclusion, found in the General Exclusions section of the policy, is waived only with respect to unforeseen serious illness occurring to the registered team member as referenced above. No coverage is provided under the Registration Cancellation coverage if the team is unable to attend the tournament due to any of the following:

- COVID-19 related illness of a rostered team member's family member
- The affected team member being quarantined or otherwise required to stay at home or shelter in place due to exposure to COVID-19
- The tournament for which the team was registered is cancelled by the venue or promoter due to COVID-19 concerns

### Home Testing and Telehealth Appointments:

In some cases, a physician is present remotely via a telehealth method when a home test is taken, which would allow the physician to confirm that a rostered team member has contracted COVID-19.

If a home test does not involve a Physician, the rostered team member must reach out to a Physician to confirm that the rostered team member has contracted COVID-19 and is unable to participate in the tournament. Please note that a Physician's visit delivered via a telehealth method may be able to satisfy this requirement.

## **Pre-Existing Conditions and COVID-19:**

The same limitations and exclusions that apply to all claims also apply to claims for losses caused by COVID-19, including the Exclusion for Pre-Existing Conditions (where applicable).

### **Coverage Limits:**

- The maximum amount recoverable for any team registration is the team Registration Fee paid, up to \$5,000.
- Overall maximum Aggregate Limit of Liability is \$1,000,000