

**Application Form for an International Health Insurance
for Longterm Sailor**

Policyholder

First name _____

Last name _____

Date of birth _____

Gender male female

Address _____

Telephone _____

Home country _____

Nationality _____

Height _____ Weight _____

Name of the yacht _____

E-mail _____

(Please state your e-mail address, so that we can provide you with all information regarding this insurance.)

BEGIN DATE OF INSURANCE COVER: _____

Person Insured (if not identical with the policyholder)

First name _____

Last name _____

Date of birth _____

Gender male female

Address _____

Telephone _____

Home country _____

Nationality _____

Height _____ Weight _____

Policy Holder

Name _____

DECLARATION ON THE FOLLOWING DISEASES

I declare herewith, that I do not suffer or have not suffered from one of these diseases:

- Any form of cancer
- Organ failure
- Any form of organ / tissue transplant
- HIV or other syndromes related to the immune system
- Syndromes in relation to the hematopoietic (blood forming) system
- Coagulation (bleeding) disorders
- Multiple sclerosis
- Cystic fibrosis
- Insulin dependent diabetes
- Chronic hepatitis
- Growth hormone deficiency
- Infertility
- Any other material condition. A material condition is one which requires a period of hospitalisation, recurrent or continuous medical attention. If you have any doubt whether a condition is material you should disclose it.

IF YOU SUFFER OR HAVE SUFFERED FROM ONE OF THESE DISEASES, PLEASE GIVE FULL DETAILS ON THE FOLLOWING PAGE.

DECLARATION:

To the best of my knowledge the information provided on this application form, whether in my own hand or not, is true and complete. I understand that failure to disclose, or misrepresentation of any pertinent facts may lead to the denial of a claim or cancellation of any policy. I understand and agree that this application and the statements contained herein shall form the basis of the contract issued as a result of this application. I authorise any doctor, who has ever attended me, to provide the Insurer with any information that may be required including prior medical history.

The Insured agrees that Pantaenius will save the personal data under the condition of the Federal Data Protection Act (BDSG) and will give the data to the participating underwriters and re-insurer(s) and that Pantaenius is entitled to change underwriters. Please see the Data Protection Clause and the Data Processing Information Sheet for detailed information.

Place/Date

Signature Policy Holder

Please send with original signature to Pantaenius.

Place/Date

Signature Person Insured

Please send with original signature to Pantaenius.

Policy Holder

Name _____

NAME OF DOCTOR

DETAILS OF CONDITION

DATE OF TREATMENT

DETAILS OF TREATMENT

CURRENT STATE OF HEALTH

DECLARATION:

To the best of my knowledge the information provided on this application form, whether in my own hand or not, is true and complete. I understand that failure to disclose, or misrepresentation of any pertinent facts may lead to the denial of a claim or cancellation of any policy. I understand and agree that this application and the statements contained herein shall form the basis of the contract issued as a result of this application.

I authorise any doctor, who has ever attended me, to provide the Insurer with any information that may be required including prior medical history.

Place/Date

Signature Person Insured



DATA PROTECTION CLAUSE
21083/0608 ©

I agree that the Insurer and the Pantaenius Group may, insofar as is necessary, provide information arising from the application documents or the implementation of the contract (premiums, insured events, changes to risk, policy endorsements) to reinsurers for the purposes of assessing risk and processing the insurance or reinsurance policy and also for the purposes of assessing risk and the claims made to other insurers. They may likewise provide such information to the German Insurance Association (Gesamtverband der deutschen Versicherungswirtschaft e. V., GDV) for forwarding to other insurers. This agreement applies irrespective of the contract being concluded and also applies to corresponding enquiries for any other insurance contract applications and for future applications.

I further agree that the Insurer and the companies belonging to the Pantaenius Group may keep my general application, contract and claims data in a central data bank and may forward such data to my insurer and broker, insofar as this constitutes the proper handling of my insurance affairs.

Without affecting the contract, I further give my agreement, which I can revoke at any time, that the broker(s) may also use my general application, contract and claims history data for providing advice and customer support in relation to other financial services. Medical history data may only be forwarded to insurers and reinsurers involved in the contracts; such data may only be forwarded to brokers where it is required for formation of the contract.

Finally, I declare that I have had the opportunity to take note of the content of the data processing information sheet upon making my application.

DATA PROCESSING INFORMATION SHEET

Preliminary remarks

Today, insurance companies can only work with the aid of electronic data processing (EDP). This is the only way in which contractual relationships can be handled correctly, quickly and economically. EDP also offers the insured community better protection from misuse than the former manual system. Processing personal data which has been provided to us is regulated by the Federal Data Protection Act (BDSG), according to which the processing and use of data is only permitted if the BDSG or another statutory provision allows it or if the person concerned has agreed.

The BDSG always allows the processing and use of data if this takes place within the scope of the specific purpose of a contractual relationship or of a mutual trust similar to a contract or if it is necessary for protecting the justified interests of the party storing the data / storage place and there are no reasons for assuming that the affected person's interests worth protecting do not outweigh the exemption from processing or use.

Declaration of consent

Irrespective of this requirement to rank interests in individual cases and with a view to a secure legal basis for data processing, a declaration of consent in accordance with the BDSG has been included in your insurance application.

This applies beyond the termination of the insurance contract and ends either upon refusal of the application or upon your revocation, which can be given at any time, subject to the principle of good faith.

If the declaration of consent is completely or partially deleted when the application is made, this could possibly lead to the contract not being concluded. Despite revocation or the complete or partial deletion of the declaration of consent, data may be processed and used within the limits allowed by statute as set out in the preliminary remarks.

Some important examples of the processing and use of data are set out below.

1. Storage of data

by your Insurer and the Pantaenius Group as broker (hereafter referred to as the Insurer). We store data necessary for the insurance contract. Firstly, this consists of your information from the application (application data). In addition, actuarial data relating to the contract is held such as customer number (partner number), insured amounts, term of insurance, premium, bank details and, if necessary, third party details, e.g. broker, loss adjuster or doctor (contract data). In the case of an insured event, we store your loss information and, if necessary, we also store third party information.

2. Disclosure of data

to reinsurers. In the interests of its policyholders, an insurer will always take into consideration any adjustment to the risks it has assumed. For this reason, we cede part of the risks to both domestic and foreign reinsurers in many cases.

These reinsurers also require corresponding actuarial information from us, such as policy number, premium, type of insurance coverage and risk, risk loading and, in individual cases, your personal details. If reinsurers participate in the risk assessment and loss adjustment, they will also be provided with the appropriate documents.

In individual cases the reinsurers use further reinsurers, to whom they also disclose corresponding data.

3. Disclosure of data to other insurers

According to the Insurance Contract Act, the insured must inform the Insurer of all circumstances which are relevant to the risk assessment and loss adjustment when making an application, upon any endorsement to the policy and in the event of loss. This includes e.g. information relating to other similar insurance policies (applied for, existing, rejected or cancelled). In order to avoid insurance fraud, to clarify possible inconsistencies within the insured's information or in order to close gaps in the assessment of accrued losses, it may be necessary to ask other insurers for information or to provide corresponding information upon request.

An exchange of personal data between the insurers is also necessary in certain circumstances (double insurance, statutory subrogation and loss sharing agreements). This entails the disclosure of data relating to the affected person such as name and address, car registration number, type of insurance coverage and risk, or information relating to loss, such as amount of loss and date of loss.

4. Central reference system

When examining an application or a loss, it may be necessary either for the purposes of risk assessment, for further clarification of the facts or for avoiding insurance fraud, to make enquiries of the responsible trade association or of other insurers. It may also be necessary to respond to corresponding enquiries made by other insurers. For this reason, trade associations have central reference systems.

There are such central reference systems with the Association of Life Assurance Companies, the Association of Indemnity Insurers and the Association of Private Health Insurance.

Entries can only be made into this reference system and it can only be used for purposes that can be pursued with the aid of the respective system, i.e. only if specific preconditions are fulfilled.

- termination following the normal expiry of the contract by the Insurer after a minimum of 3 insured events within 36 months.
- early termination and termination following the normal expiry of the contract upon specific justified suspicion of fraudulent use of the insurance policy.

Purpose: Checking information on previous insurance policies during the application process.

5. Data processing within the Pantaenius Group

In order to be able to offer customers comprehensive insurance coverage, data is partly entered into a central system within the Pantaenius Group. General application, contract and benefit data is available to the individual subsidiaries by means of shared access. This means in particular that information such as your address and the fact that you are our customer can be requested throughout the Group. In this way, incoming post can be directed to the correct company and you can immediately be given the name of the appropriate contact during telephone enquiries or provided with the requested information. Your address can also be maintained in one place in the event that you conclude contracts with other subsidiaries. Enquiries as to your customer number, your date of birth and your bank details simplify correct entries as to money receipts, e.g. in cases of doubt, and make further enquiries unnecessary. Retrieving the entire history of losses and benefits from individual insurance areas enables a customer-oriented practise of regulation.

All other types of data, particularly health information, credit rating and any benefit data that would allow conclusions as to your state of health to be drawn, or recorded legal relationships (e.g. transfer, right to insurance benefits) does not constitute "general" data and also does not constitute data relating to third parties. Such data is therefore not included in central data processing.

The following groups currently belong to the Pantaenius Group:

Pantaenius GmbH & Co. KG, Hamburg
Pantaenius GmbH & Co. KG, Skive, Denmark
Pantaenius S.A.M., Monaco
Pantaenius UK Ltd., Plymouth, England
Pantaenius Versicherungsmakler GesmbH, Vienna, Austria
Pantaenius America Ltd., New York, USA
Pantaenius AB, Malmo, Sweden
Pantaenius S.L., Palma de Mallorca, Spain
Pantaenius d.o.o., Pula, Croatia

6. Customer support by insurance brokers

You will receive customer support from a Pantaenius Group company and, as applicable, other brokers in relation to your insurance affairs as well as in the scope of any other offers of services.

Brokers in this sense are, in addition to individual persons, brokering companies and also credit institutions, building societies, investment companies and real estate companies etc in the scope of collaboration with financial services.

In order to properly carry out its work, we send the broker for this purpose information from your application, contract and benefit data, e.g. insurance policy number, premiums, type of insurance coverage and risk, number of insured events and amount of benefit, which is necessary for providing advice and customer service. Our brokers process and use this personal data themselves in the scope of the above mentioned advice and customer support. You will also be informed by us about any changes to data relevant to customers. Each and every broker is legally and contractually obliged to observe the provisions of the BDSG and its specific duties of confidentiality (e.g. professional secrets and data secrecy).

Examples:

- early termination and termination following the normal expiry of the contract by the Insurer after a minimum of two insured events within 12 months.