



8/1/2025-2026 Version  
 Policy Number: BSR F226792 - 01

### USA Climbing Excess Participant Accident Coverage Highlights

<b>Insurer</b>	Great American Insurance Group
<b>Excess Accident Medical Expense - Maximum Benefit</b>	\$25,000 (Per covered accident)
<b>Dental Maximum</b>	\$500 (Per covered accident)
<b>Deductible</b>	\$1,000 (Applies separately to each covered person and each Injury)

### Eligibility

**Class 1 – Eligible Persons:** USA Climbing members, athletes/competitors, clubs, teams, event organizers/ directors, local organizing committees (LOC's), managers, coaches, trainers, officials, judges, scorekeepers, belayers, routesetters, wall-builders, regional coordinators and volunteers, but only while acting in their capacity as such with respect to USA Climbing sanctioned events.

**Class 1 – Covered Activities:** These eligible persons are covered only while participating in scheduled, sponsored and supervised activities of USA Climbing, including team travel or group travel arranged and supervised by the policyholder to or from a covered activity.

### Coverage Summary

- Initial Treatment must be received within 90 days of the injury.
- Benefits are payable for 104 weeks from the date of the Covered Accident. Medical Expense will be paid only for such expense which is not recoverable from any other insurance policy, service contract or workers' compensation.

<b>Accidental Death &amp; Dismemberment Benefits</b>	
<i>Description</i>	<i>Amount</i>
Principal Sum	\$2,500
Loss Period	Loss within 365 days of injury

<b>Loss Schedule</b>	
<i>Description</i>	<i>Amount</i>
Loss of Life	100% of Principal Sum
Loss of Both Hands	100% of Principal Sum
Loss of Both Feet	100% of Principal Sum
Loss of Entire Sight of Both Eyes	100% of Principal Sum
Loss of One Hand and One Foot	100% of Principal Sum
Loss of One Hand and Entire Sight of One Eye	100% of Principal Sum
Loss of One Foot and Entire Sight of One Eye	100% of Principal Sum
Loss of Speech and Hearing	100% of Principal Sum
Loss of One Hand or One Foot	50% of Principal Sum
Loss of Thumb and Index Finger of the Same Hand	25% of Principal Sum



Notes:

- *Loss of a Foot* means Severance through or above the ankle.
- *Loss of a Hand* means Severance through or above the wrist.
- *Loss of Hearing* means total and permanent loss of hearing in both ears that is irrecoverable and cannot be corrected by any means.
- *Loss of Sight* means the total, permanent loss of sight of one eye.
- *Loss of Speech* means total, permanent loss of audible communication that is irrecoverable and cannot be corrected by any means.
- *Loss of a Thumb and Index Finger of the same hand* means Severance through or above the metacarpophalangeal joints of the same hand (the joints between the fingers and the hand).
- *Severance* means the complete separation and dismemberment of the part from the body.
- Accidental Death & Accidental Dismemberment Benefits - \$500,000 Aggregate Limit

<b>Policy Exclusions (including but not limited to):</b>
<ul style="list-style-type: none"> <li>• Sickness, disease, mental infirmity, emotional or psychological trauma, or bacterial or viral infection, or medical or surgical treatment thereof, except for any bacterial infection resulting from an accidental external cut or wound or accidental ingestion of contaminated food;</li> </ul>
<ul style="list-style-type: none"> <li>• Suicide, self-destruction, attempted suicide or self-destruction, or intentional self-inflicted injury, while sane or insane;</li> </ul>
<ul style="list-style-type: none"> <li>• The covered person being legally intoxicated as determined according to the laws of the jurisdiction in which the injury occurred;</li> </ul>
<ul style="list-style-type: none"> <li>• Travel in or on any on-road and off-road two or three wheeled motorized vehicle not requiring licensing as a motor vehicle including snowmobiles;</li> </ul>
<ul style="list-style-type: none"> <li>• An accident that results in a cardiovascular accident or stroke caused solely and exclusively by exertion, as verified by a physician, while the covered person participates in a covered activity;</li> </ul>
<ul style="list-style-type: none"> <li>• Aggravation, during a covered activity, of an injury the covered person suffered before participating in that covered activity, unless we receive a written medical release from the covered person's physician;</li> </ul>
<ul style="list-style-type: none"> <li>• Participation in covered activities not sponsored by or under the supervision of the Policyholder, including skiing, ice hockey, or snowmobiling</li> </ul>
<ul style="list-style-type: none"> <li>• The covered person riding or driving in any kind of race</li> </ul>
<ul style="list-style-type: none"> <li>• Specified extra-hazardous activities, including: parachuting, hang gliding, motorcycling, mountain biking, nonmotorized bike racing (BMX), scuba diving, snow or water skiing, mountain climbing, sky diving, amateur racing of any motor vehicle by water or land, piloting any aircraft, bungee jumping, zip lining, base jumping, spelunking, whitewater rafting, surfing, and parasailing.</li> </ul>

## Claims Reporting

- Call **(800) 475.2691 option 1** or email ***claimsteam@getpomi.com***
- **Notice of Claim:** Written notice of claim must be given to Great American within 20 days after a covered person's loss, or as soon thereafter as reasonably possible. Notice must be given by or on behalf of the claimant to Great American, with information sufficient to identify the covered person.
- **Claim Forms:** Great American will send claim forms to the claimant upon receipt of a written notice of claim. If such forms are not sent within 15 days after the giving of notice, the claimant will be deemed to have met the proof of loss requirements upon submitting, within the time fixed in this policy for filing proof of loss, written proof covering the occurrence, the character and the extent of the loss for which claim is made. The notice should include the covered person's name, the Policyholder's name, and the Policy Number.
- **Proof of Loss:** Written proof of loss must be furnished to Great American within 90 days after the date of the loss. If the loss is one for which this policy requires continuing eligibility for periodic benefit payments, subsequent written proofs of eligibility and of the loss must be furnished at such intervals as Great American may reasonably require. Failure to furnish such proof within such time, provided such proof is furnished as soon as reasonably possible and in no event, except in the absence of legal capacity of the claimant, later than one year from the time proof is otherwise required send a claims form upon receipt of notice.

## Policy Explanation

This policy is intended to cover accidents and injuries due to climbing related incidents in excess of the climbers' personal health insurance policy. If a covered injury takes place, the individual needs to file the claim on their own insurance and to Great American. If the injury has medical expenses that exceed the limits of their personal insurance, the Participant Accident will cover up to \$25,000 of additional expenses per occurrence.

In the case of Death & Dismemberment, there is a sublimit of \$2,500 that applies to these incidents. If there is a loss of life, the policy will pay \$2,500 (100% of Principal Sum) in excess of personal health insurance. If there is a loss of a hand or foot, the policy will pay \$1,250 (50% of Principle Sum) in excess of personal health insurance.