## Disclaimers

Group Term Life Insurance is underwritten by Guarantee Trust Life Insurance Company (GTL), Glenview, IL on Policy/Certificate form series GLMP-3002/GLC-3002. The policy is issued to The Health Depot Association and coverage is subject to all terms, definitions, conditions, exclusions, and limitations. Availability and terms vary by state. Members must be part of an eligible class to receive these benefits. For complete details of coverage, please see the certificate. Coverage becomes effective on the date provided in your Membership material. Coverage is subject to termination in accordance with the Association Group Master Policy provisions. Notice of termination provided to the Association is considered notification to all Association Members and will not be sent to you individually by GTL. GTL does not provide nor is affiliated with the discount programs provided as a part of membership in The Health Depot Association. The insurer has the right to increase rates and has the option to cancel coverage.

Dependent Child(ren) are covered from birth to 26 years old.

Spouse includes Common Law Marriage Partner, Domestic Partner or Civil Union Partner if legally recognized in the governing jurisdiction.

The following rates apply for the coverage underwritten by Guarantee Trust Life Insurance Company as part of your membership in the HD BasicProtect membership. The rates by plan are: 5,000 Term Life; Member = \$2.60, Member + Spouse = \$4.10, Member + Child(ren) = \$3.00, Family = \$4.50. 10,000 Term Life; Member = \$5.20, Member + Spouse = \$8.20, Member + Child(ren) = \$6.00 Family = \$9.00. 15,000 Term Life; Member = \$7.80, Member + Spouse = \$12.30, Member + Child(ren) = \$10.40, Member + Spouse = \$16.40, Member + Child(ren) = \$12.00, Family = \$18.00.

# **Exclusions & Limitations**

## **TERM LIFE**

Suicide Exclusion - If a Covered Person dies as the result of suicide or any attempt at suicide, while sane or insane within two years of his/her Effective Date of coverage, We will be liable only for an amount equal to the Premium paid.

With respect to an increase in the amount of insurance, We will consider the two year period to begin as of the effective date of such increase.

Our return of such Premium will be in lieu of all other benefits under this Certificate which may have been payable for that Covered Person.

### **ACCIDENTAL DEATH BENEFIT**

If, within 90 days from the date of an Accident which occurs while coverage is in force, Injury from such Accident results in a loss covered by this benefit, We will pay the benefit in the amount set opposite such loss, as shown on the Schedule of Benefits. If more than one such loss is sustained as the result of one Accident, We will pay only one amount, the largest to which the Covered Person is entitled.

This benefit is subject to all the terms, conditions and exclusions of the Certificate.

No benefits are payable for any loss caused by:

- · Suicide or intentionally self-inflicted Injury while sane or insane.
- · War or any act of war, declared or undeclared.
- Travel, or flight in or descent from any kind of aircraft unless as a fare paying passenger on a regularly scheduled flight.
- As a passenger on an official flight of the Military Airlift Command of the United States or similar air transport services of other countries.
- Infections, except infections which occur simultaneously with or through a cut or wound sustained as the direct result of an Injury, independent of any other cause; and
- The non-accidental ingestion of a contaminated substance.
- Being under the influence of alcohol or any drug unless administered and taken as prescribed by a Doctor.
- · Participation in an attempt to commit an assault or felony, or participation in a riot.
- Voluntary gas inhalation or poison voluntarily taken, administered or inhaled.
- · Riding or driving as a professional in any kind of race for prize money or profit.

#### Please see certificates for state specific exclusions and limitations.