## ATTACHING TO AND FORMING PART OF: 802050839

#### ISSUED TO: Baker Rebecca Leigh Anne

It is hereby declared and agreed that with effect from the Effective Date shown on the Declaration Page attached to the Evidence of Insurance, and continuing for the below mentioned time period, beginning on the Effective Date, any and all charges, expenses or claims related directly or indirectly to the following shall be excluded from this insurance, unless such charges, expenses or claims are directly attributable to and resulting from a covered accident:

Rider Condition	Time Period of Rider
Reproductive System, any disease or	
disorder of the reproductive system, and	
any operation or treatment for, including	60 months
workup for infertility, or complications	
thereof.	

All other terms, clauses, conditions, provisions, restrictions and exclusions remain unchanged.

### (NAME OF MEMBER)

X\_\_\_\_\_ (SIGNATURE OF MEMBER, GUARDIAN OR PROXY)

DATE (Mo./Day/Yr.)

### **AZIMUTH RISK SOLUTIONS**

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Carlos M. Robinson President

Rider No. 2

### ATTACHING TO AND FORMING PART OF: 802050839

### ISSUED TO: Baker Rebecca Leigh Anne

It is hereby declared and agreed that with effect from the Effective Date shown on the Declaration Page attached to the Evidence of Insurance, and continuing for the below mentioned time period, beginning on the Effective Date, any and all charges, expenses or claims related directly or indirectly to the following shall be excluded from this insurance, unless such charges, expenses or claims are directly attributable to and resulting from a covered accident:

Rider Condition		Time Period of Rider
Cyst, tumor or neoplasm of reproductive system, including operation or treatment for complications thereof.	the any or	

All other terms, clauses, conditions, provisions, restrictions and exclusions remain unchanged.

(NAME OF MEMBER)

X\_\_\_\_\_

(SIGNATURE OF MEMBER, GUARDIAN OR PROXY)

DATE (Mo./Day/Yr.)

# **AZIMUTH RISK SOLUTIONS**

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Carlos M. Robinson President