### ATTACHING TO AND FORMING PART OF: ARS-04-0001342

**ISSUED TO: Simon** 

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:

Time Period of Rider		
12 months		
All other terms, clauses, conditions, provisions, restrictions and exclusions remain unchanged.		
OR PROXY) DATE (Mo./Day/Yr.)		

AZIMUTH RISK SOLUTIONS, LLC.



## ATTACHING TO AND FORMING PART OF: ARS-04-0001342

ISSUED TO: Madeline

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	
All other terms, clauses, conditions, provisions, restrictions and exclusions remain unchanged.		
(NAME OF MEMBER)		
x		
(SIGNATURE OF MEMBER, GUARDIAN C	DR PROXY) DATE (Mo./Day/Yr.)	

AZIMUTH RISK SOLUTIONS, LLC.



## ATTACHING TO AND FORMING PART OF: ARS-04-0001342

**ISSUED TO: Charles** 

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
All other terms, clauses, conditions, provisions, r	restrictions and exclusions remain unchanged.
(NAME OF MEMBER)	
x(SIGNATURE OF MEMBER, GUARDIAN C	DATE (Mo./Day/Yr.)

AZIMUTH RISK SOLUTIONS, LLC.

Carlos M. Robinson
President

## ATTACHING TO AND FORMING PART OF: ARS-04-0001342

**ISSUED TO: Oliver** 

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
Eczema and or any disease or disorder of the skin or subcutaneous tissues, including Any operation or treatment of or complications thereof	36 months

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, LLC.

