Rider No. 1

ATTACHING TO AND FORMING PART OF: ARS-03-0003130

ISSUED TO: Tiffanie Kendra Kilgast

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
STDsexually transmitted disease, any disease or disorder, or any treatment for, or	
any operation for 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, LLC.

Carlos M. Robinson President

Rider No. 2

ATTACHING TO AND FORMING PART OF: ARS-03-0003130

ISSUED TO: Tiffanie Kendra Kilgast

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
Ovarian cyst(s), any disease or disorder of the ovaries, and any operation or treatment for, including workup for infertility, cyst, tumor, or neoplasm, and any complications thereof	60 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.

Carlos M. Robinson President