ATTACHING TO AND FORMING PART OF: 691802110033

ISSUED TO: Amy Fulbright Arnold

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
Right Shoulder, any injury to, disease, or disorder of the right shoulder including any treatment or operation for or 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

Carlos M. Robinson President

ATTACHING TO AND FORMING PART OF: 691802110033

ISSUED TO: Travis Lee Arnold

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
Kidney(s), any disease or disorder of the kidney(s)including any treatment or 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

Carlos M. Robinson President