



ARISA ASSURANCES S.A.

INFORMATION DOSSIER

Prepared in accordance with ISVAP Regulation n. 35 of 26/05/2010

INSURANCE CONTRACT FOR SKI AND SNOWBOARD LESSONS REFUND

Snowcare LESSONS

This information dossier containing:

- Information Note
- Glossary
- Insurance conditions

must be delivered to the Contracting party prior to signing insurance contract, or if applicable, the insurance proposal.

**WARNING BEFORE SIGNING PLEASE READ CAREFULLY
THE INFORMATION NOTE.**

INFORMATION NOTE

The Informative Note below is edited following the scheme outlined by Private Insurance Control Authority (IVASS), even though its contents are not subject to preventive approval by IVASS. The Contracting party must read insurance policy conditions before subscribing the policy contract.

INSURANCE COMPANY INFORMATION

GENERAL INFORMATION:
 ARISA Assurances S.A., Société Anonyme
 5, Rue Eugène Ruppert, L-2453 Luxembourg
 +352 262940.1 - www.arisa-assur.com - info@arisa-assur.com
 ARISA Assurances S.A. does not belong to a group.
 ARISA Assurances S.A. are authorized to operate in Italy under the freedom to provide services regulation (register on the list attached to the Register of insurance companies with number II.00717, consult the above list to verify the correctness of authorization to pursue the activity) and they are under supervision of Commissariat aux Assurances Luxembourg, 7, boulevard Joseph II, L- 1840 Luxembourg.

INSURANCE COMPANY ASSETS INFORMATION:
 Net assets: 42,7 euro million
 -which capital: 15 euro million
 -which reserves: 27,7 euro million
 Solvency ratio damage insurance: 497%
 The solvency ratio is the ratio between the amount of available solvency margin and the amount of solvency margin required by law.

CONTRACT INFORMATION

CONTRACT DURATION AND TACIT RENEWAL:
 The insurance contract has a duration variable and **not implies tacit renewal.**
MODE OF COMPLETION OF CONTRACT:
 The contract is completed when the Insurance Company issues the policy. Insurance will be operating since 24h00 of the day specified in the policy provided that the insurance premium has been paid, otherwise the insurance will remain suspended until the 24h00 of the day when the Contracting party pay the premium due under and for the art. 1901, paragraph 1, Civil Code.
WARNING In case of placement of the insurance contract at a distance, the Insurance Company or the Intermediary will require to the Contracting party to underwrite and send back the policy sent by the same Insurance Company on paper or another durable medium, unless the contract has been formed as informatics document in compliance with technical regulations issued by art. 71 of Legislative Decree no. 2005 82.
MODE FOR TRANSMISSION AND RECEIPT OF CONTRACTUAL AND PRECONTRACTUAL DOCUMENTATION IN DISTANCE CONTRACTS:

The Contracting party may choose to receive and transmit pre-contractual and contractual documentation on paper or via email. In any case, the Contracting party shall be entitled to subsequently change his choice.
NON CONCLUSION:
 The contract can not be completed if the Contracting party fails to provide all information and documents requested by the Insurance Company.
RIGHT TO RECONSIDER:
WARNING For distance contracts the Contracting party within 14 days after the conclusion of the contract, has the right to withdraw from the signed contract. The Contracting party shall be entitled to a refund of the premium paid for the period not enjoyed (at a rate of 1/360 of annual premium per day for unused warranty), net of tax and other charges billed to the Contracting party by law. Pursuant to art. 67-duodecies, paragraph 5), letter b), D.Lgs. 206/2005, the right to reconsider does not apply in case the duration of the insurance is less than one month. Reference is made to the article 2 of section 2 of the policy for details.

INSURANCE COVERAGE OFFERED – LIMITATIONS AND EXCLUSIONS

WARNING All the coverages are given as a secondary RISK. In relation to the kind of policy undersigned by the policyholder, insurance coverage, limitations and exclusions are:

Insurance Coverage	Limitations and exclusions
Refund for sickness	Full cost of the ski/snowboard lesson
Refund for injury	
Refund for death	
Refund for hospitalization	
Refund for examination medical convocation	
Refund for resignation, suspension from work or new hiring	
Refund for transfer of residence for work reasons	

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Refund for cancellation or modification of the vacation plan	
Refund for inability to reach the ski resort	
Refund for house damage	

WARNING This insurance implies limitations and exclusions of coverage and conditions of suspension of guarantees that may reduce or deny compensation of claims, as specified in sections 1, 2 and 3 of the contract. Moreover the guarantees may have deductibles, excess and limits, as specified in section 3 of the contract. In particular, references are made to Art. 1 of Section 2 and Art. 2, 3, 4, 5, 6, 7 of Section 3 of the contract, for the details.

INSURED DECLARATIONS REGARDING CIRCUMSTANCES OF RISK – TERMINATION:

WARNING Eventual inexact or reticent statements about the circumstances of risk made during contract closing may affect the right to the insurance coverage, as specified at Art. 3 in section 2 of the contract. Causes of termination are also included as specified at sections 2 and 3 of the contract.

AGGRAVATION OF RISK:

The contracting party must send written communication to the Insurance Company about every aggravation of risk as specified at Art. 6 in section 2 of the contract, **on pain of total or partial loss of the right of compensation** (Eq. for subsequent participation to competition as professional that, for the purposes of this contract, would result in an increase in risk that would result in the exclusion of insurance coverage).

PREMIUM:

The premium must be paid with one solution in cash or cheque, bank transfer or credit card. It is not possible to fractionate the premium. The Insurance Company may apply discounts on the premium for objective determined categories of insured persons.

RIGHT OF WITHDRAWAL:

WARNING In some cases the Insurance Company has the right of rescission as specified in section 2 of the contract.

In particular, references are made to Art. 3 and 6 of Section 2 of the contract, for the details.

LIMITATION PERIOD AND DEBARMENT OF RIGHTS DERIVED BY THE CONTRACT:

Should the Italian Law apply, the rights derived by this insurance have a time limit of 2 years from the date of the fact over which the right is based on, according to Art. 2952 Civil Code.

APPLICABLE LAW TO THE CONTRACT:

According to Art. 180 of legislative decree n. 209/05, the Italian law applies. The parties can agree in written form to account this insurance to a different legislation that the Italian law; in such case the limitations derived from national mandatory rules must be preserved, eventual specific provisions of Italian legal system will be predominant.

TAXATION SYSTEM:

This insurance is subject to Italian tax arrangements.

LIQUIDATION PROCEDURES AND COMPLAINTS INFORMATION

CLAIMS – COMPENSATIONS LIQUIDATION:

WARNING The contract indicates modalities and terms to report a claim, as specified at Art. 7 in section 3 of the contract.

WARNING The claims management service is committed to Coris Assistance 24ORE S.p.A, third company, as specified at Art. 7 in section 3 of the contract.

COMPLAINTS:

Any complaint concerning the contractual relationship or the claims management may be presented as it follows: by email at the following address: reclami@arisa-assur.com; by fax at the following number: +352 26294040; by ordinary post to be addressed to ARISA Assurances S.A., B.P. 3051, L-1030 Luxembourg. The complaint must report the following information: name, surname, address and telephone number of the complainant, policy number and policyholder's details, number and date of the accident, specification of the subject or department whose services are considered not satisfactory, short and exhaustive description of the reasons of the complaint, any further information or document that are useful to describe the reasons of the complaint. The Company will provide to handle the complaint within 45 days from the receipt, according to the applicable Law. If the claimant has not received a reply or he considered not satisfactory the reply received, the complainant, before taking a legal action in front of the Court, can write to "IVASS – Istituto per la Vigilanza sulle Assicurazioni – Servizio Tutela del Consumatore", Via del Quirinale 21, 00187 Roma (fax: 06.42.133.745 - 06.42.133.353 or by PEC ivass@pec.ivass.it) supplying a copy of the complaint forwarded to the Insurance Company and the reply received,

even using the model downloadable from IVASS website: <http://www.ivass.it> clicking on "Come presentare un reclamo", downloading the model "[facsimile di reclamo all'Ivass](#)". The complaint must report the following information: name, surname and address of the complainant, including the telephone number if considered appropriate, specification of the subject or department whose services are considered not satisfactory, short and exhaustive description of the reasons of complaint, copy of the complaint forwarded to the Insurance Company and copy of the reply, any further information or document that are useful to describe the reasons of the complaint. Any complaints relating to alleged infringement of Italian Insurance Private Code, its implementing rules or Italian Law on distance marketing of insurance contracts by Insurance Companies, Insurance Intermediaries or insurance assessors, can be lodged in front of IVASS according to the above mentioned procedure. Any complaint in respect of the services rendered by our Company may also be addressed to the Supervisory Authority of the Home Member State: Commissariat aux Assurances Luxembourg (7, Boulevard Joseph II, L-1840 Luxembourg). For the solution of trans-border litigations, it is possible to lodge the complaint to IVASS or directly to the competent foreign body, namely the foreign body of the Country where is situated the Insurance Company that has issued the policy (that it can be found by accessing the following website ec.europa.eu/internal_market/fin-net/members_en.htm) asking to perform the FIN-NET procedure. Without any prejudice for the possibility of taking legal action in front of the Courts, in case of disputes on insurance contracts, it's mandatory to lodge a mediation procedure pursuant to article 5 Legislative Decree 4

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of March 2010, n. 28, as amended by article 84, paragraph 1, Legislative Decree 21 June 2013 n. 69. Further information on how to lodge a complaint are available on the Company's website address <http://www.arisa-assur.it/Reclami.html>

ARISA Assurances S.A. is responsible of truth and accuracy of data and information contained in this informative Note.

The legal representative
Dr Hans Plattner



September 30th 2016

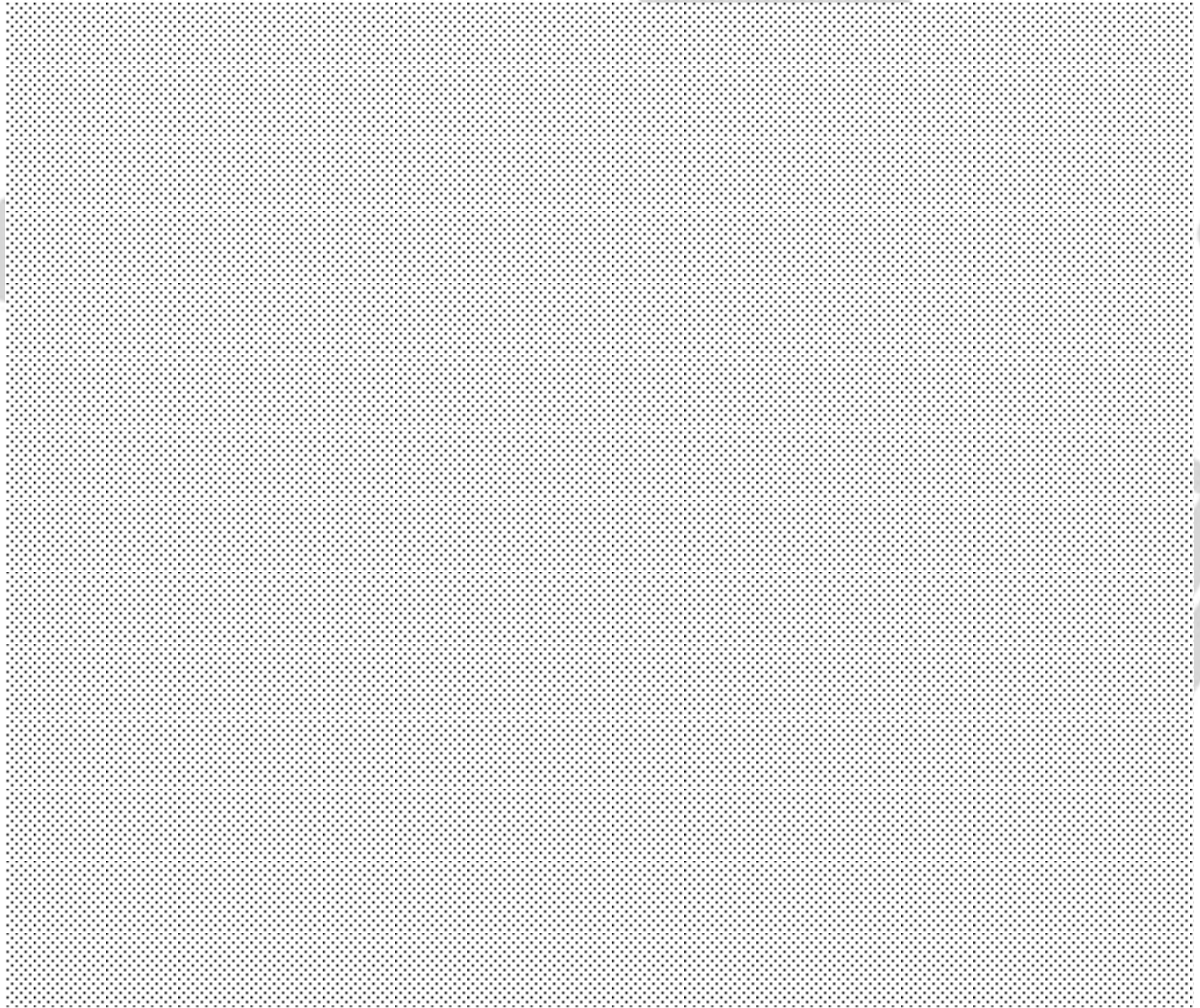
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1. GLOSSARY

The terms in this contract written in **ITALIC CAPITAL LETTERS** refer entirely and exclusively to the following definitions:

1. **INSURANCE**: The insurance contract.
2. **SNOWCARE LESSONS**: The name of the product object of the *INSURANCE*.
3. **COMPANY**: ARISA Assurances S.A., B.P. 3051, L-1030 Luxembourg.
4. **INTERMEDIARY**: The intermediary of the *INSURANCE*.
5. **CLAIMS MANAGEMENT SERVICE**: The *COMPANY* has appointed Coris Assistance 24ORE S.p.A., Via L. Canonica 72, 20154 Milano.
6. **CONTRACTING PARTY**: The subject who signs the *INSURANCE*.
7. **INSURED**: The subject whose interest is protected by the *INSURANCE*. Where *INSURANCE* is combined with a *LESSON*, the insured is the person who owns the *LESSON* combined with *INSURANCE* regularly paid to the *contracting party* or to other subjects authorized by its.
8. **RESIDENCE**: The usual domicile.
9. **HOUSE**: Building, or portion of a building, used by the *INSURED* for habitual residential or domicile.
10. **CLAIM**: The happening of a harmful event that the *INSURANCE* covers.
11. **RISK**: A probability of a *CLAIM* taking place and the entity of the damage that could derive from it.
12. **PREMIUM**: The sum owed by the *CONTRACTING PARTY* or the *INSURED*.
13. **INJURY**: The event due to a casual, violent and external cause that produces objectively noticeable bodily harm that has, as a direct consequence, a permanent inability or the decease.
14. **SICKNESS**: Every clinically diagnosable altered state of health not arising from *INJURY* or pregnancy, does not allow the *INSURED* to attend lesson ski and/or snowboard.
15. **MEMBER OF THE FAMILY**: The spouse, cohabiting partner, children, parents, brothers, sisters of the *INSURED*.
16. **LESSON**: the ski and/or snowboard lesson given by the *CONTRACTING PARTY* and entirely paid by the *INSURED*.

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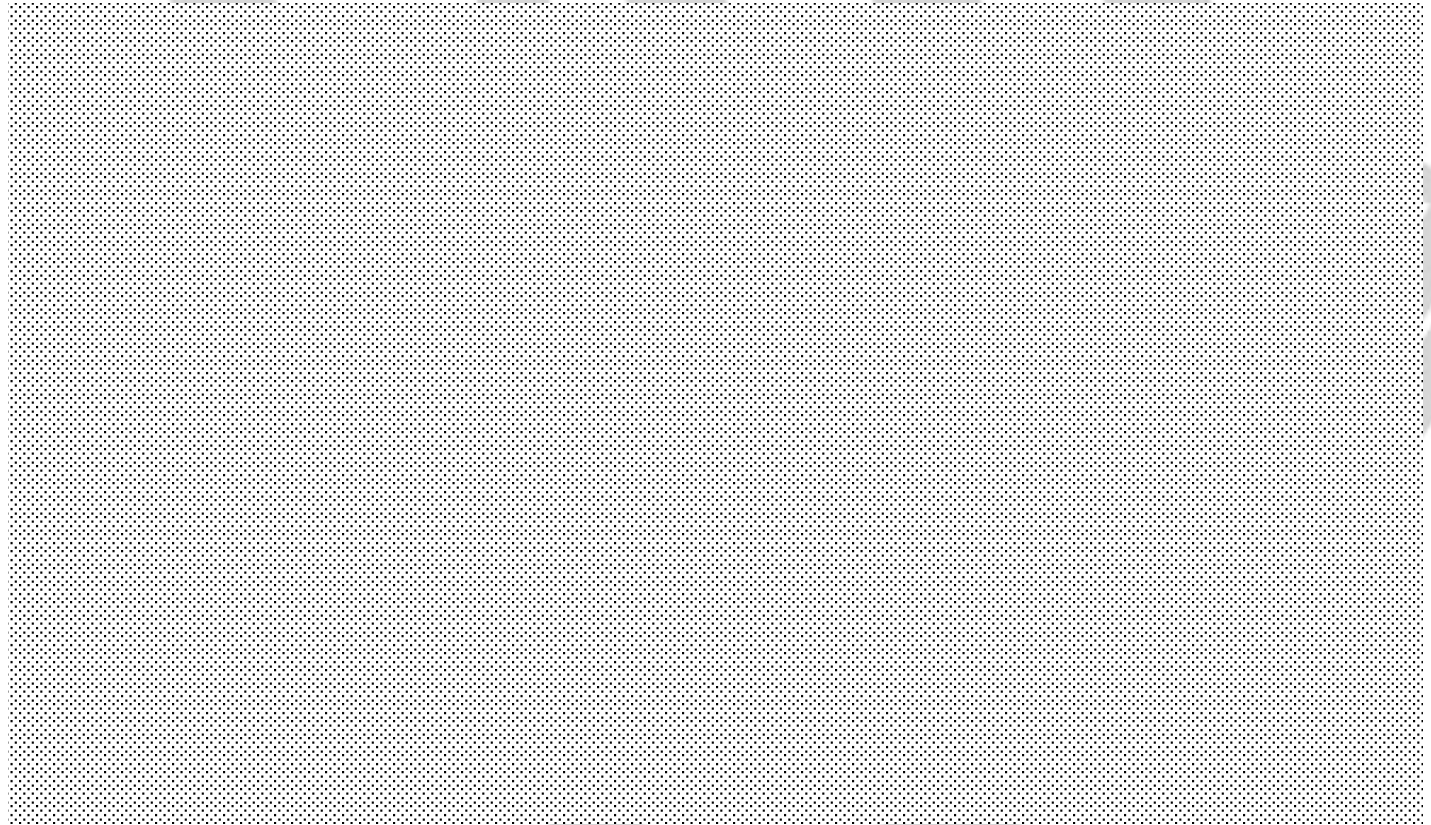


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2. GENERAL CONDITIONS

1. **PAYMENT OF THE PREMIUM:** This *INSURANCE* commences with effect from the effective date indicated by the *CONTRACTING PARTY* if the *PREMIUM* or the first instalment of *PREMIUM* has been paid; otherwise it will commence at 24.00 hours on the day when payment is made. The *PREMIUM* must be paid in accordance with the methods set out in the sign-up form, to the *INTERMEDIARY* or other person authorised by it.
2. **RIGHT TO RECONSIDER FOR DISTANCE CONTRACTS LONGER THAN 30 DAYS:** the *CONTRACTING PARTY*, within 14 days after the conclusion of the contract, has the right to withdraw from the signed contract. The *CONTRACTING PARTY*, within the afore mentioned terms, shall give a written notice to the *COMPANY* or to the *INTERMEDIARY* by registered letter with acknowledgement of receipt. The *COMPANY* will provide to refund the premium paid for the period not enjoyed (at a rate of 1/360 of annual premium per day for unused warranty), net of tax and other charges billed to the *CONTRACTING PARTY* by LAW. The date of withdrawal will coincide with the date of dispatch of the registered letter, as resulting from the postmark.
3. **FALSE STATEMENTS AND NON-DISCLOSURE:** The *PREMIUM* has been calculated on the basis of the statements of the *INSURED* and/or the *CONTRACTING PARTY* who are bound to declare all relevant facts for the purpose of a proper assessment of the *RISK* by the *COMPANY*. False statements and/or non-disclosure of the *INSURED* and/or *CONTRACTING PARTY* in respect of circumstances that have a bearing on the proper understanding of the situation and assessment of the *RISK* may bring about the total or partial forfeiture of the right to the *INSURANCE* cover provided by the *INSURANCE* and even actual termination of the *INSURANCE* in the terms of articles 1892,1893 and 1894 of the Italian Civil Code. These provisions apply also to any extension, prolonging, renewal or endorsement.
4. **FRAUDULENT CLAIMS:** Should the *INSURED* and/or the *CONTRACTING PARTY* make any claim that is intentionally false or fraudulent, either as regards the amount claimed or otherwise, they will forfeit the right to *INSURANCE* indemnity as set out in the *INSURANCE*.
5. **INSURANCE WITH DIFFERENT INSURERS:** In the event of *LOSS*, should in respect of the same interest and for the same or similar *RISK* a number of insurances be in force, the *INSURED* and/or the *CONTRACTING PARTY* must notify the *CLAIMS HANDLING COMPANY* and/or the *COMPANY* in writing of the other contracts taken out. In the event of a *LOSS* the *INSURED* and/or the *CONTRACTING PARTY* must give this notice to all the insurers and is bound to claim from each of them the indemnity due in accordance with the respective contracts taken alone, but the aggregate sums to be collected must not exceed the amount of the damage. Should the sum of said claims exceed the amount of the damage, the *COMPANY* will be liable to pay only its proportional share on the basis of the indemnity calculated in accordance with its own contract, all joint liability with other Insurers being in any event excluded.
6. **WORSENING OF THE RISK:** The *INSURED* and/or the *CONTRACTING PARTY* must give notice to the *INTERMEDIARY* in writing of any worsening of the *RISK*. The *INTERMEDIARY* will advise the *COMPANY* of all worsening of the *RISK*. Worsening of the *RISK* not accepted by the *COMPANY* may bring about the total or partial forfeiture of the right to indemnity as well as termination of the *INSURANCE* in the terms of Art. 1898 of the Italian Civil Code.
7. **ADJUSTERS' MANDATE:**
 - a) inquire into the circumstances as to time and place and manner of the *LOSS*;
 - b) verify that the description and the statements shown in the contract documents are correct and if necessary advise whether at the time of the *LOSS* there were circumstances that had altered the *RISK* and had not been notified;
 - c) verify that the *INSURED* and the *CONTRACTING PARTY* have fulfilled their duties;
 - d) proceed to calculate the damage and expenses.
8. **PAYMENT OF THE INDEMNITY:** Once the operation of the cover has been checked and the damage assessed, the *COMPANY* will, through the *CLAIMS HANDLING COMPANY*, pay the indemnity within 90 days from these inquiries except as set out in the special conditions. In the event of a judicial inquiry taking place as to the damage payment of the indemnity will be suspended until the date of the judgment becomes enforceable.
9. **COMMUNICATIONS:** All communications must be forwarded by registered letter or fax except as set out in the special conditions.
10. **TAX CHARGES:** Present and future tax charges in respect of this contract are to be borne by the *CONTRACTING PARTY*.
11. **JURISDICTION:** Any dispute pertaining to this contract shall be referred to the venue of the *RESIDENCE* of the *CONTRACTING PARTY* or the *INSURED*.
12. **FORM OF THE INSURANCE:** Any variations, extensions, renewals or substitution of this contract agreed between the parties must be proven in writing.
13. **REFERRAL TO THE RULES OF LAW:** In respect of anything not otherwise laid down, the rules of Italian law will apply.

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3. SPECIAL CONDITIONS

1. **PURPOSE OF THE CONTRACT:** Refund of the paid *LESSON* unused by the *INSURED*.
2. **TERRITORIAL VALIDITY:** Europe.
3. **PERIOD OF VALIDITY:** Starting at 24:00 the date of payment of the premium by the insured up to the beginning of the last *LESSON* assured.
4. **VALIDITY OF THE INSURANCE:** *INSURANCE* guarantees are not operating when the events specified in the policy, as listed below, they had already occurred at the time the *LESSON* payment. In all cases of redemption request the *INSURED* will have to declare that it is not possible to postpone the *LESSON* to another date and had not already been refunded by the *CONTRACTING PARTY*.
5. **COVERAGE:** All the coverages listed below are given as a secondary *RISK* to what is already covered by other insurance policies in effect stipulated by the *INSURED* and/or by the *CONTRACTING PARTY*; the compensation is net of any other compensation due from other policies in effect and/or by the national health service and/or other compulsory insurance; limit of liabilities, deductible and excesses are applied per *CLAIM*/event as specified below:

SNOWCARE LESSONS:

	When?	What?	How?	Other restrictions?
1.	Refund for sickness	Following <i>SICKNESS</i> of the <i>INSURED</i> .	The <i>COMPANY</i> will refund to the <i>INSURED</i> the cost of the <i>LESSON</i> unused for the period of impossibility to carry out the <i>LESSON</i> .	The <i>INSURED</i> must ask the refund of the <i>LESSON</i>, paid and unused, to the <i>CLAIMS MANAGEMENT SERVICE</i> before the <i>LESSON</i> of which can not enjoy, specifying the reasons and the number of the unused lessons and providing all the documents needed to prove the right to refund. The <i>SICKNESS</i> of the <i>INSURED</i> must be serious enough to attend the <i>LESSON</i> . The insurance guarantee is not valid even in case the <i>SICKNESS</i> of the <i>INSURED</i> occurred between the date of payment and the date of the <i>LESSON</i> if they depends on a relapse or a worsening of diseases that are congenital or pre-existing at the date of payment of the <i>LESSON</i>. The <i>INSURED</i> will have to guarantee during the period of their availability <i>SICKNESS</i> 7 days out of 7 at the times from 8:00 to 17:00, indicating the domicile in order to allow the possible visit doctors the <i>COMPANY</i> .
2.	Refund for injury	Following <i>ACCIDENT</i> of the <i>INSURED</i> .		The <i>INJURY</i> of the <i>INSURED</i> must be serious enough to prevent him to attend the <i>LESSON</i> . Guarantee doesn't work when <i>INJURY</i> of the <i>INSURED</i> occurred during aerial sports practice, bobsleigh, skeleton, rock-climbing, kockey-on-ice, diving. The <i>INSURED</i> will have to guarantee during the period of their availability <i>SICKNESS</i> 7 days out of 7 at the times from 8:00 to 17:00, indicating the domicile in order to allow the possible visit doctors the <i>COMPANY</i> .
3.	Refund for death	Following the death of the <i>INSURED</i> or a <i>MEMBER OF THE FAMILY</i> .		
4.	Refund for hospitalization	Following hospitalization of the <i>INSURED</i> due to his health conditions.		The insurance guarantee is not valid even in case the <i>HOSPITALIZATION</i> of the <i>INSURED</i> occurred between the date of payment and the date of the <i>LESSON</i> if they depends on a relapse or a worsening of diseases that are congenital or pre-existing at the date of payment of the <i>LESSON</i>.
5.	Refund for medical visit	Following a medical examination convocation.		The medical examination must be convened exclusively by public entities or insurance companies.
6.	Refund for resignation, suspension from work or new hiring	Following resignation, suspension from work (layoff, mobility, etc.) or new employment of the <i>INSURED</i> .		The guarantee doesn't work in the event of voluntary resignation.

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	When?	What?	How?	Other restrictions?
7. Refund for transfer of residence for work reasons	Following the <i>INSURED</i> must transfer his residence for work reasons.			
8. Refund for cancellation or modification of the vacation plan	If the <i>INSURED</i> is an employee and has been modified or cancelled the company's vacation plan for reasons beyond his control.			
9. Refund for inability to reach the ski resort	If the <i>INSURED</i> is unable to reach the ski resort by road, rail or air, for objective reasons.			The guarantee is not valid in case the inability to reach the ski resort from the <i>INSURED</i> is due to missed departure due to lack of necessary documents for the journey (by way of example and without limitation, passport, document identity, transportation tickets, visa, vaccinations, etc.) except in the case of theft duly reported to the Competent Authority.
10. Refund for house damage	If the <i>INSURED</i> has suffered damage to housing as a result of fire, explosion, burglary, spillage of water or natural events that may require the presence at its <i>INSURED</i> dwelling.			

6. EXCLUSIONS: The *INSURANCE* doesn't refund in any case the unused *LESSON* caused by or occurring as a result of or in the event of:
- a) strikes, unrest, popular tumult, acts of terrorism or sabotage, occupation, lock-ins, as well as civil or military coups, wars, invasions, hostility (whether war is declared or not), civil wars, revolutions, insurrections, military or usurped power, martial law, confiscation, nationalisation, requisition, destruction or damage to goods resulting from acts or orders of the Public Authorities whether Central, Regional or Local;
 - b) tornados, hurricanes, earthquakes, volcanic eruptions, flooding, heavy sea, snow slides, avalanches, seaquakes or landslides
 - c) adverse weather conditions;
 - d) ionising radiation or radioactive contamination caused by nuclear fuels or by nuclear waste deriving from transmutation of the atom nucleus as well as from radioactive, toxic, explosive properties or other dangerous characteristics of nuclear equipment or their components;
 - e) intentional acts, malice or gross negligence by the *INSURED* and/or *CONTRACTING PARTY* and/or third parties for whom they are legally responsible;
 - f) use of drugs, narcotics, hallucinogens or medicines not prescribed by a doctor;
 - g) alcohol abuse;
 - h) conscious disregard of official rules;
 - i) suicide or attempted suicide, self-inflicted injury;
 - j) handling or possession of arms including weapons for hunting and war;
 - k) taking part in thefts, robberies or any other crimes;
 - l) any accidental act determining the non-applicability of this *INSURANCE*, including prohibitions set down by the local, national and international authorities;
 - m) participation in any type of competition (also amateur) including training for these competitions with the sole exception of giant and special slalom amateur-non professional competitions without monetary prizes;
 - n) esthetic treatment;
 - o) events or reasons not objectively demonstrated;
 - p) cancellation of the *LESSON* by the *CONTRACTING PARTY*;
 - q) errors or omissions at the time of reservation of the lesson;
 - r) cost of *LESSON* refund to the *INSURED* by the *CONTRACTING PARTY*;
 - s) bankruptcy proceeding or ceases to operate of the *CONTRACTING PARTY*;
7. HOW TO ASK FOR THE REFUND:

in order to benefit from the insurance guarantee, *INSURED* must immediately inform the *CLAIMS MANAGEMENT SERVICE*, to whom all the documents must be addressed, before the beginning of the *LESSONS* that cannot be used, otherwise the *COMPANY* will have the right to not refund (Art. 1915 Italian Civil Code). The notice of the *CLAIM* can be given by means of the web site, or by telephone, or by fax or by PEC. The report of the *CLAIM* must contain the home address where the *INSURED* guarantees the availability, 7 days out of 7 at the times from 8:00 to 17:00, in order to permit during the period of *SICKNESS* or *INJURY* the assessment by the medical adviser of the *COMPANY*. In case of no indication of the place of availability or in case of failure to reach during the visit by the medical adviser of the *COMPANY*, the same will have the right not to proceed with the reimbursement requested. For the purposes of compliance with the deadline for reporting of the *CLAIM*, will not be deemed suitable *CLAIMS* sent by email or by registered mail, as instruments which do not provide the exact date of the complaint. *INSURED* have also to attach all the documents needed to prove the right to refund, as well as any other document indicated in the policy, specifying the number of unused *LESSON* and their cost, producing the supporting documents relating to the original purchase and the cancellation of the lessons.

The *CLAIMS MANAGEMENT SERVICE* operates 24 hours a day and can be contacted:

Phone: +39 02 20564.564
 Fax: +39 02 20564.999
 Website: www.24hassistance.com
 PEC: posta.certificata@pec.coris.it

September 30th 2016

