

Accidental Death Benefit



Everence Association, Inc., a fraternal benefit society

As a member of Everence Association, Inc. (Everence®), you are eligible for \$1,000 of Accidental Death benefit. **THERE IS NO COST TO YOU.** This benefit is only available to those members who have applied for, received membership, and, at the time of becoming a member, reside in a state where Everence Association, Inc. is licensed. This benefit ends on your 70th birthday.

Definitions

When used in this document, the following words and phrases have the meaning listed below.

Accidental bodily injury means an injury sustained by the member which is a direct result of an accident, independent of disease or bodily or mental illness or infirmity or any other cause, and which occurs after the member has signed the membership application.

Accidental death means death which occurs as a direct result of accidental bodily injury independent of all other causes. Except for drowning or internal injuries shown by autopsy, the injury causing death must be shown by a visible wound on the exterior of the body.

Proof of death means one of the following: (1) a death certificate; (2) a certified decree from a court of competent jurisdiction as to the finding of death; or (3) a statement from a medical doctor who attended the deceased.

We, us and our means Everence Association, Inc. (Everence) with its home office in Goshen, Indiana.

You, your means the member of Everence Association, Inc. as indicated on the Everence membership application.

Benefit provided

All eligible members of Everence Association, Inc. are eligible for this benefit at no cost. We will pay, in one lump sum, a \$1,000 death benefit to your surviving spouse, your estate, or your designated beneficiary upon your accidental death. This benefit will only be paid out if your death occurs prior to age 70. There are no medical exams or underwriting requirements. As long as you remain a member of Everence, you will be eligible for this benefit.

This benefit is fully paid by Everence who will be responsible for all death benefit payments and other matters relating to this benefit. All correspondence will be sent to the most recent address that Everence has on record for you. If you change your address, please notify Everence as soon as possible.

Prior to benefit payment, proof of death must be submitted to our home office (see **Receipt of benefit** section). Proof of the accidental death must show that the member's death occurred:

- As a direct result of an accidental bodily injury independent of all other causes;
- Within 180 days following the date of the accidental injury;
- While the deceased was a member of Everence Association, Inc.; and
- Prior to the member's 70th birthday.

Beneficiaries

If you wish to designate a beneficiary other than your spouse or estate, you must submit to us a **Beneficiary Change Request** form. In order to pay the benefit to someone other than your spouse or your estate, we must receive the change form prior to your death. You may request and submit the beneficiary change form to the Member Benefits Manager (see **Contact information** section). If you fail to designate a beneficiary, we will pay the benefit to your surviving spouse. If you do not have a spouse or your spouse predeceases you, we will pay the benefit to your estate unless you have otherwise designated a different beneficiary.

Exclusions

Everence will not pay a benefit if the member's accidental death is directly or indirectly caused or contributed to by:

A. Death caused or contributed to by:

- disease or infirmity of mind or body, or medical or surgical treatment for such disease or infirmity ("natural causes");
- an infection not occurring as a direct result or consequence of the accidental bodily injury;
- any attempt at suicide, or intentionally self-inflicted injury, while sane or insane;
- travel in or descent from an aircraft, if the member acted in a capacity other than as a passenger;
- travel in an aircraft or device used for testing or experimental purposes, used by or for any military authority, or used for travel beyond the earth's atmosphere;
- war, including all armed conflict, declared or undeclared, or any act of war, including any act of committing or resisting armed conflict, or service in the military forces of any country at war or in any civilian noncombatant unit serving with those forces;
- active participation in a riot, insurrection, or terrorist activity;
- committing or attempting to commit a felony;
- intoxication as defined by the jurisdiction where the accident occurred;
- riding or driving an air, land, or water vehicle in a race, speed, or endurance contest;
- bungee jumping;
- rock or mountain climbing; or
- aeronautics (hang-gliding, skydiving, parachuting, ultra light, soaring, ballooning, and parasailing).

B. Death occurring while the member is incarcerated.

C. Death caused or materially contributed to by voluntary intake or use by any means of:

- Any drug, unless prescribed or administered by a physician; or
- Poison, gas or fumes, unless a direct result of an occupational accident.

D. Death caused or materially contributed to by participation in an illegal occupation or activity.

The member shall be presumed to have died as a result of accidental injury if the aircraft or other vehicle in which he/she was traveling disappears, sinks, or is wrecked, and the member's body is not found within one year from the date the vehicle was scheduled to arrive at its destination, or the date the member is reported missing to the authorities.

Receipt of benefit

To receive the death benefit, you will need to submit a certified copy of proof of death as defined in the *Definitions* section and a completed **Death Benefit Request** form. Please request and submit the form to the Member Benefits Manager (see *Contact information* section). Unless prohibited by law, we have the right to examine the body and have an autopsy done at any time.

Contact information

The Member Benefits Manager can be reached by:

- Email: MemberADB@everence.com
- Phone: (800) 348-7468 ext. 3388
- Letter: Everence, Attn: Member Benefits Manager, P.O. Box 483, Goshen IN 46527

Everence reserves the right to change and/or modify from time to time any provision pertaining to this benefit. While Everence does not anticipate such change or modification, this benefit cannot be guaranteed.

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