

WHO ARE WE?

MANGIN SAS is an affiliate of GRAS SAVOYE, France's 1st insurance broker and a part of the Willis Towers Watson world group.

WHAT IS AssurCircuit?

AssurCircuit is an "optional" insurance warranty for motorbike pilots wishing to insure their rolling time outside of competitions or speed races.

"A fall doesn't only happen to others..."

You fall on the track

- Are you hurt?
- Is your bike too damaged to get back on the track?


The warranty covers the expenses of your track time

- If you fall in the morning: the whole day is reimbursed at 100 %
- If you fall after the lunch break: the day is reimbursed at 50%.

The bodily or material damage must have been recorded by the track organizer, the track manager or the security unit operating on the track.

HOW TO SUBSCRIBE?

Complete Subscription Form



AssurCircuit

SUBSCRIPTION FORM

(Valid for a pilot only)

PILOT DETAILS

Mrs. Ms. Mr.

Surname : First Name :

Date of Birth :

Address :

License Nr or CASM : Obtained on :

Phone : Email :

MOTORBIKE INFORMATION

License Nr : Brand : Model :

INFORMATION ABOUT THE EVENT

Organiser : Track :

Start date : / / 20 End date : / / 20

OPTION CHOICE

TICK THE CHOSEN OPTION	Price per pilot
1 day option : <input type="checkbox"/>	15 euros
2 day option : <input type="checkbox"/>	30 euros
3 day option : <input type="checkbox"/>	45 euros

Check your choice of : **MANGIN SAS**
 Send with the Sub and Reception Date to : **MANGIN SAS**
 40-42 Boulevard Raymond Poincaré - 55000 BAR LE DUC
 Payment by Intermediary MANGIN SAS (see conditions) or by bank transfer to : **MANGIN SAS**
 BIC : FWBZ3333 IBAN : FR 75 135 024 101 011 67 80


CONDITIONS AGREEMENT

I, the undersigned, declare the information given in the present form to be sincere and true.

I have fully read the information notice (pages 2 - 4 of the present document), serving as the general conditions of insurance, and declare the entirety of these conditions without exception.


In : Signature of the declarator: _____

Date :



ASSURCIRCUIT, an insurance solution offered by MANGIN SAS, insurance brokerage and reinsurance company, affiliate of GRAS SAVOYE Berger Simon, GRAS SAVOYE Group, 40-42 Boulevard Raymond Poincaré, 55000 BAR LE DUC, FRANCE. Phone: +33 3 29 79 06 78. <http://www.grassavoie.com>. SAS with a capital amount of 406,400 euros. R.C.S of BAR LE DUC under the ref. nr FR 35 343 335 808. Intermediary registered with ORIAS under the reference number 07 000 615. (<http://www.orias.fr>). Under the inspection of the ACPR, Prudential Control and Resolution Authority, 61 rue de Taïtbout 75436 Paris Cedex 9, FRANCE.

Sign each page of Information notice attached Subscription Form, in space « signature of the pilote... »



TERMS AND CONDITIONS

Collective damage insurance contract No 2 000 298 with optional membership subscribed by GRAS SAVOYE BERGER SIMON SAS with a capital amount of 406,400 euros. R.C.S of BAR LE DUC under the ref. nr FR 35 343 335 808. Intermediary registered with ORIAS under the reference number 07 000 615. (<http://www.orias.fr>). Under the inspection of the ACPR, Prudential Control and Resolution Authority, 61 rue de Taïtbout 75436 Paris Cedex 9, FRANCE.

Transféré en anglais aux fins d'information uniquement. Veuillez vous référer aux conditions originales en français et en français pour toute information.

Information of the adherent for the exercise of the right of rescission according to the article L112-10 of the Insurance Code: The adherent is invited to verify that he is not already beneficiary of a warranty covering the risks guaranteed by the new contract. If it is the case, he can use the right of rescission for the contract during 30 calendar days starting from its conclusion, without any fee for generally, if all the following conditions are met:
 - The adherent has subscribed to this contract for non-professional purposes;
 - This contract comes in complement of the purchase of a good or service sold by a supplier;
 - The adherent justifies being already covered for one of the risks guaranteed by this new contract;
 - The contract he wishes to rescind is not completely executed;
 - The adherent has no accident guaranteed by this contract.
 In this case, he can use his right to rescind this contract by letter or any other durable medium addressed to the insurer of the new contract, accompanied by a document justifying that he already benefits from one of the warranted risks. After reception of the letter by ASSURCIRCUIT, the contract will be deemed to never have existed. All dues potentially paid for will be reimbursed to the insured party within 30 days, starting from the reception date of the rescission letter.

The "Reimbursement" Circuit insurance guarantees one claim per registration and per driving event.

1. DEFINITIONS

Accident: Each sudden and unpredictable event occurring on the runway of the track whilst driving the motorized two- or three-wheeled land vehicle, and not intentionally provoked by the insured pilot.

Adherent/Insured Party: The physical person aged over 16 at the time of driving on the track, holding the B.S.B (French Road Safety Certificate) or C.A.S.E.M (French Certificate of Aptitude for Motorcycle Sports) or a valid motorcycle driving license (verified by a European country allowing the use of a motorized two-wheeled land vehicle by the adherent on the track. The insured party must wear a helmet and body protection (gloves, one-piece or zipped suit, back protection and boots). His or her first and last names must appear on the track entry form and the subscription confirmation.

Body Damage: All bodily harm endured by the insured conductor of a motorized two-wheeled land vehicle during an accident that occurred whilst driving on the track.

Material Damage: All material damage occurring on a motorized land vehicle during an accident that happened whilst driving on the track.

Deductible: Remaining amount borne by the insured party in the case of compensation and deducted from the compensation received by the insured party.

Motorized Land Vehicle: Two- or three-wheeled vehicle driven by the insured party on the track, of which the brand, model and license plate are listed on the "Reimbursement Circuit Insurance" subscription.

Track: Track of which the suburb or terrace runway is designated on the subscription form and on which the driving happens outside of all competition.

Track Time: One minimum to several consecutive days event reserved and paid for the insured party. The dates of the event must clearly appear on the subscription form of the insurance contract.

Signature of the pilot as acceptance of the general conditions of insurance.

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Send all the required documents, a minimum 7 days before the rolling time by mail assurcircuit@grassavoie.com or by post.

MANGIN SAS
AssurCircuit
40-42 Boulevard Raymond Poincaré
55000 BAR LE DUC



Willis Towers Watson

HOW PAY YOUR SUBSCRIPTION?

- Payment with bank check, was send with all documents by post (adresse listed above)
- Payment by international bank transfer (order reference « AssurCircuit») :



RELEVÉ D'IDENTITÉ BANCAIRE/IBAN

FRANCE				DOMICILIATION		NOM ET ADRESSE DU TITULAIRE	
Code Etabl	Code Guichet	N. Compte	Ciè R.I.B.	GRCA LAXOU NANCY ENTREPR		SAS MANGIN	
16106	01001	86401959176	01	Bank Identification Code (BIC)		40 BOULEVARD RAYMOND POINCARE 55000 BAR LE DUC	
ETRANGER uniquement International Bank Account Number (IBAN) FR76 1610 6010 0186 4019 5917 601				AGRIFRPP861			


HOW DO I KNOW IF MY SUBSCRIPTION IS VALIDATED?

In reception of all documents and the payment, we send the bill **AND** the subscription form countersign

WHAT TO DO IN AN ACCIDENT SITUATION?

Fill out and sign the accident declaration (You must include your track access sticker with your declaration)

Place your track access sticker in this box



A ACCIDENT DECLARATION FORM

PILOT DETAILS

Mr. Ms. Mr. Surname: _____ First Name: _____
 Date of Birth: _____ Address: _____
 License No or CASM: _____ Obtained on: _____
 Phone: _____ Email: _____

MOTOBIKE INFORMATION

License No: _____ Brand: _____ Model: _____

ACCIDENT INFORMATION

Date of the accident: _____ Time: _____
 Track: _____ Group: _____

TICK THE RIGHT BOXES

Track Commissioner's Intervention: YES NO Medical Intervention: YES NO

DAMAGE REPORT

TICK THE RIGHT BOXES

Pilot unable to continue (translation by track doctor): YES NO
 Bike unusable (translation by witness): YES NO

Surname: <input type="text"/> PILOT MANAGER First Name: <input type="text"/> Signature: _____	Surname: <input type="text"/> ORGANISER First Name: <input type="text"/> Signature: _____	Surname: <input type="text"/> TRACK DOCTOR First Name: <input type="text"/> Signature: _____
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In: _____ Date: _____
 Signature of the declaring pilot: _____

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Get the accident declaration signed by the track organiser and, in case of bodily damage, the track doctor

- BY MAIL

ASSURCIRCUIT@GRASSAVOYE.COM

- BY POST

MANGIN SAS
 ASSURANCE CIRCUIT
 DEPARTEMENT SINISTRE
 40-42 BOULEVARD RAYMOND POINCARE
 55000 BAR LE DUC

CONTACT US :

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