

**Dear Customer,**

This Product Disclosure Sheet (PDS) provides you with key information on your family takaful. Other customers have read this PDS and found it helpful; **you should read it too.**

Date: 01/06/2026

## 1 What is Takaful myLife Protect Prime?

Takaful myLife Protect Prime offers takaful protection for **50** years. It pays a lump sum benefit if the person covered dies or suffers total and permanent disability ("TPD") during the certificate term.

This plan applies Shariah concepts like **Tabarru'**, **Wakalah**, **Jualah**, **Qard** and **Hibah**.

## 2 Know Your Coverage/Benefits

**As an illustration**, for a 30-year-old male with takaful contribution of **RM10,555.49** yearly, you will receive the following family takaful **coverage/benefits**:

**Basic Plan**

|                                   |                                                                                                                                                             |
|-----------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Death/TPD                         | The higher of <b>RM500,000</b> or the balance in the Participant Account ("PA"), if any.                                                                    |
| Accidental Death/TPD              | An additional <b>RM500,000</b> , up to 3 times of the amount depending on the Accidental Events.                                                            |
| Death While Performing Hajj/Umrah | An additional <b>RM1,500,000</b> .                                                                                                                          |
| TPD Yearly Recovery               | An additional <b>RM40,000</b> for 5 consecutive years after the TPD claim is approved.                                                                      |
| Terminal Illness                  | <b>RM100,000</b> . The basic sum covered will then be reduced by the same amount paid under this benefit.                                                   |
| Vital Care                        | The total contribution of <b>RM5,277.75</b> which is equal to 6 months of takaful contribution, if admitted to an Intensive Care Unit for more than 5 days. |
| Family Accidental Death           | <b>RM10,000</b> upon accidental death of a family member before age 70, up to a maximum of RM40,000 in total.                                               |
| Life Celebration Rewards          | 50% of the annualised takaful contribution, up to RM2,000 per any one of the Life Celebration Events.                                                       |
| Maturity                          | Any balance in the PA.                                                                                                                                      |

**Riders (Optional add-on benefits)**

|                   |                                                                                                                       |
|-------------------|-----------------------------------------------------------------------------------------------------------------------|
| myProtect Booster | An additional benefit of 10% up to 50% of the basic sum covered, increasing every 5 years, payable upon death or TPD. |
|-------------------|-----------------------------------------------------------------------------------------------------------------------|

**Note:**

- The death/TPD benefit amount will be reduced if the claim event occurs when the person covered is below age 5.
- The benefit provides coverage only up to age 70, for accidental death/TPD, and death while performing Hajj/Umrah.

**Your family takaful excludes:**

- death due to suicide within the first year; and
- TPD that existed before the coverage starts, or resulting from attempted suicide or self-inflicted injuries.

**Note:** This list is **non-exhaustive**. You must refer to the Appendix for the additional exclusions.

**If you have any questions or require assistance on your family takaful, you can:**


Call us at:  
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Scan the QR code to refer to  
Appendix for more info

### 3 Know Your Obligations

| For this family takaful, you must pay a takaful contribution of:                                   |                                                                                                                                                               |       |       |       |       |       |       |       |       |       |       |      |
|----------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|------|
| Takaful Contribution                                                                               | Basic: <b>RM7,339.49</b>   myProtect Booster: <b>RM3,216.00</b> ; per yearly                                                                                  |       |       |       |       |       |       |       |       |       |       |      |
| Duration: <b>20</b> years                                                                          |                                                                                                                                                               |       |       |       |       |       |       |       |       |       |       |      |
| <b>You also have to pay the following fees and charges</b> (as part of your takaful contribution): |                                                                                                                                                               |       |       |       |       |       |       |       |       |       |       |      |
| Wakalah fee*                                                                                       | The Wakalah fee is deducted upfront as a percentage of the takaful contribution to meet our management expenses and total distribution cost (i.e. commission) |       |       |       |       |       |       |       |       |       |       |      |
|                                                                                                    | Year                                                                                                                                                          | 1     | 2     | 3     | 4     | 5     | 6     | 7     | 8     | 9     | 10    | > 10 |
|                                                                                                    | %                                                                                                                                                             | 55.00 | 45.00 | 40.00 | 30.00 | 30.00 | 30.00 | 30.00 | 25.00 | 20.00 | 20.00 | -    |
|                                                                                                    | Basic (RM)                                                                                                                                                    | 4,037 | 3,303 | 2,936 | 2,202 | 2,202 | 2,202 | 2,202 | 1,835 | 1,468 | 1,468 | -    |
|                                                                                                    | myProtect Booster (RM)                                                                                                                                        | 1,769 | 1,447 | 1,286 | 965   | 965   | 965   | 965   | 804   | 643   | 643   | -    |
| Commission*<br>(as part of Wakalah fee)                                                            | Year                                                                                                                                                          | 1     | 2     | 3     | 4     | 5     | 6     | 7     | 8     | 9     | 10    | > 10 |
|                                                                                                    | %                                                                                                                                                             | 30.00 | 20.00 | 15.00 | 5.00  | 5.00  | 5.00  | 5.00  | 5.00  | 5.00  | 5.00  | -    |
|                                                                                                    | Basic (RM)                                                                                                                                                    | 2,202 | 1,468 | 1,101 | 367   | 367   | 367   | 367   | 367   | 367   | 367   | -    |
|                                                                                                    | myProtect Booster (RM)                                                                                                                                        | 965   | 643   | 482   | 161   | 161   | 161   | 161   | 161   | 161   | 161   | -    |
| Service charge                                                                                     | <b>RM5</b> per month for Basic Plan and <b>RM1</b> per month for each rider.                                                                                  |       |       |       |       |       |       |       |       |       |       |      |
| Stamp duty                                                                                         | <b>Payable by Syarikat Takaful Malaysia Keluarga Berhad</b>                                                                                                   |       |       |       |       |       |       |       |       |       |       |      |

\* All amount in RM presented are rounded to the nearest Malaysian Ringgit (RM).

### 4 Other Key Terms

- You have a duty to take reasonable care not to provide false or inaccurate information when you apply for this plan. Failure to do so may result in the risk of having your claim rejected and/or certificate terminated.
- You may nominate a nominee(s) and ensure that your nominee(s) is/are aware of your participation in this plan.
- Please inform us immediately if something happens that may lead to a claim.

**Note:** This list is **non-exhaustive**. You should refer to the certificate wording for the full list of terms and conditions.

#### ? Can I cancel my certificate?

Yes, you may cancel your certificate by giving a written notice to us.

- Free-look Period:** You may cancel your certificate by returning the certificate within 15 days after your certificate has been delivered to you. The takaful contribution that you have paid minus any medical examination expenses will be refunded to you.
- Written Notice:** If you choose to surrender your certificate after the 15 days of the free-look period, you may request to surrender your certificate by filling in the surrender form and address it to us, and any balance in the PA will be payable.

#### Customer's Acknowledgement\*

Please ensure you are filling this section yourself and are aware of what you are placing your signature for.

☐

I acknowledge that Syarikat Takaful Malaysia Keluarga Berhad's sales representative has provided me with a copy of the PDS.

☐

I have read and understood the key information contained in this PDS.

\*Your acknowledgement of this PDS shall not prejudice your right to seek redress in the event of subsequent disputes over the product terms and conditions.

.....  
Name:

Date:

**Dear Customer,**

This Product Disclosure Sheet (PDS) provides you with key information on your medical and health takaful.

Other customers have read this PDS and found it helpful; **you should read it too.**

Date: 01/06/2026

## 1 What is myCritical Illness Plus?

myCritical Illness Plus offers takaful protection against critical illnesses for **50** years. It pays a lump sum benefit if the person covered is diagnosed with or undergoes surgery, for any of the 48 covered critical illnesses during the certificate term.

This rider applies Shariah concepts like **Tabarru'**, **Wakalah**, **Jualah**, **Qard** and **Hibah**.

## 2 Know Your Coverage/Benefits

**As an illustration**, for a 30-year-old male with takaful contribution of **RM6,006.00** yearly, you will receive the following takaful coverage/benefits:

|                  |                                                                                                                                                                                                                                                                                                                                                                                                        |
|------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Critical Illness | <b>RM250,000</b><br><br><b>Note:</b> <ul style="list-style-type: none"> <li>Only <b>RM25,000</b> will be payable for angioplasty and other invasive treatments for coronary artery disease coverage. This payout will not terminate this rider but will reduce the sum covered of this rider accordingly.</li> <li>The benefit amount will be reduced if the person covered is below age 5.</li> </ul> |
|------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

The critical illnesses covered under this rider include:

1. Cancer – of specified severity and does not cover very early cancers;
2. Stroke – resulting in permanent neurological deficit with persisting clinical symptoms; or
3. Heart Attack – of specified severity.

**Note:** This list is **non-exhaustive**. Please refer to the Appendix for the full list of critical illnesses covered.

Your medical and health takaful **excludes**:

- illness:
  - a) that existed before coverage starts;
  - b) due to any condition that existed or was diagnosed during the waiting period, or after the waiting period but related to that condition except critical illness caused by injury;
  - c) where any signs or symptoms before or during the waiting period, even if the diagnosis is made after the waiting period;
  - d) caused by nuclear weapon material, ionising, radiations or contamination by radioactivity or combustion of nuclear fuel;
  - e) that happens while the person is under the influence of alcohol, drugs, or mind-altering substances; or
  - f) caused by self-inflicted injuries and physical defect.

**If you have any questions or require assistance on your medical and health takaful, you can:**



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[csu@takaful-malaysia.com.my](mailto:csu@takaful-malaysia.com.my)



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Appendix for more info

### 3 Know Your Obligations

|                                                                                             |                                                                                                                                                                |       |       |       |       |       |       |       |       |       |       |      |
|---------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|------|
| For your medical and health takaful, you must pay a takaful contribution of:                |                                                                                                                                                                |       |       |       |       |       |       |       |       |       |       |      |
| Takaful Contribution                                                                        | RM6,006.00 yearly                                                                                                                                              |       |       |       |       |       |       |       |       |       |       |      |
| Duration: 20 years                                                                          |                                                                                                                                                                |       |       |       |       |       |       |       |       |       |       |      |
| You also have to pay the following fees and charges (as part of your takaful contribution): |                                                                                                                                                                |       |       |       |       |       |       |       |       |       |       |      |
| Wakalah fee*                                                                                | The Wakalah fee is deducted upfront as a percentage of the takaful contribution to meet our management expenses and total distribution cost (i.e. commission). |       |       |       |       |       |       |       |       |       |       |      |
|                                                                                             | Year                                                                                                                                                           | 1     | 2     | 3     | 4     | 5     | 6     | 7     | 8     | 9     | 10    | > 10 |
|                                                                                             | %                                                                                                                                                              | 55.00 | 45.00 | 40.00 | 30.00 | 30.00 | 30.00 | 30.00 | 25.00 | 20.00 | 20.00 | -    |
|                                                                                             | RM                                                                                                                                                             | 3,303 | 2,703 | 2,402 | 1,802 | 1,802 | 1,802 | 1,802 | 1,502 | 1,201 | 1,201 | -    |
| Commission*<br>(as part of Wakalah fee)                                                     | Year                                                                                                                                                           | 1     | 2     | 3     | 4     | 5     | 6     | 7     | 8     | 9     | 10    | > 10 |
|                                                                                             | %                                                                                                                                                              | 30.00 | 20.00 | 15.00 | 5.00  | 5.00  | 5.00  | 5.00  | 5.00  | 5.00  | 5.00  | -    |
|                                                                                             | RM                                                                                                                                                             | 1,802 | 1,201 | 901   | 300   | 300   | 300   | 300   | 300   | 300   | 300   | -    |
| Service charge                                                                              | RM1 per month                                                                                                                                                  |       |       |       |       |       |       |       |       |       |       |      |
| Stamp duty                                                                                  | Payable by Syarikat Takaful Malaysia Keluarga Berhad                                                                                                           |       |       |       |       |       |       |       |       |       |       |      |

\* All amount in RM presented are rounded to the nearest Malaysian Ringgit (RM).

### 4 Other Key Terms

- You have a duty to take reasonable care not to provide false or inaccurate information when you apply for this rider. Failure to do so may result in the risk of having your claim rejected and/or certificate terminated.
- Please inform us immediately if something happens that may lead to a claim.
- A waiting period of 60 days applies for cancer, heart attack, coronary artery by-pass surgery, serious coronary artery disease, and angioplasty and other invasive treatments for coronary artery disease; while a 30-day waiting period applies for other critical illnesses.
- The person covered must survive 30 days after being diagnosed with or undergoing surgery for a covered critical illness.

**Note:** This list is **non-exhaustive**. You should refer to the certificate wording for the full list of terms and conditions.

#### ? Can I cancel my certificate?

Yes, you may cancel your certificate by giving a written notice to us.

- Free-look Period:** You may cancel your certificate by returning the certificate within 15 days after your certificate has been delivered to you. The takaful contribution that you have paid minus any medical examination expenses will be refunded to you.
- Written Notice:** If you choose to surrender your basic plan after the 15 days of the free-look period, you may request by filling in the surrender form and address it to us. This rider will also be terminated any balance in the Participant Account ("PA") will be paid. If you wish to cancel this rider, you may request via endorsement by filling in the endorsement form and address it to us. Please note that the balance in the PA will not be paid if you decide to cancel this rider alone.

**Dear Customer,**

This Product Disclosure Sheet (PDS) provides you with key information on your family takaful.

Other customers have read this PDS and found it helpful; **you should read it too.**

Date : 01/06/2026

## 1 What is myWaiver?

myWaiver offers takaful protection against critical illnesses for **20** years. It pays the future takaful contributions starting from the next contribution due date if the person covered is diagnosed with or undergoes surgery, for any of the 47 covered critical illnesses during the contribution payment term of the certificate.

This rider applies Shariah concepts like **Tabarru'**, **Wakalah**, **Jualah**, **Qard** and **Hibah**.

## 2 Know Your Coverage/Benefits

**As an illustration**, for a 30-year-old male with takaful contribution of **RM14,598.00** yearly, you will receive the following family takaful **coverage/benefits**:

|                  |                                                                                                                         |
|------------------|-------------------------------------------------------------------------------------------------------------------------|
| Critical Illness | <b>RM500,000.00</b> per annum to pay for the future takaful contributions starting from the next contribution due date. |
|------------------|-------------------------------------------------------------------------------------------------------------------------|

The critical illnesses covered under this rider include:

1. Cancer – of specified severity and does not cover very early cancers;
2. Stroke – resulting in permanent neurological deficit with persisting clinical symptoms; or
3. Heart Attack – of specified severity.

**Note:** This list is **non-exhaustive**. Please refer to the Appendix for the full list of critical illnesses covered.

Your family takaful **excludes**:

- illness:
  - a) that existed before coverage starts;
  - b) due to any condition that existed or was diagnosed during the waiting period, or after the waiting period but related to that condition except critical illness caused by injury;
  - c) where any signs or symptoms before or during the waiting period, even if the diagnosis is made after the waiting period;
  - d) caused by nuclear weapon material, ionising, radiations or contamination by radioactivity or combustion of nuclear fuel;
  - e) that happens while the person is under the influence of alcohol, drugs, or mind-altering substances; or
  - a) caused by self-inflicted injuries and physical defect.

**If you have any questions or require assistance on your family takaful, you can:**



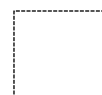
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### 3 Know Your Obligations

**For this family takaful, you must pay a takaful contribution of:**

|                      |                    |
|----------------------|--------------------|
| Takaful Contribution | RM14,589.00 yearly |
|----------------------|--------------------|

Duration: **20** years

**You also have to pay the following fees and charges** (as part of your takaful contribution):

|              |                                                                                                                                                                |       |       |       |       |       |       |       |       |       |       |     |
|--------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-----|
| Wakalah fee* | The Wakalah fee is deducted upfront as a percentage of the takaful contribution to meet our management expenses and total distribution cost (i.e. commission). |       |       |       |       |       |       |       |       |       |       |     |
|              | Year                                                                                                                                                           | 1     | 2     | 3     | 4     | 5     | 6     | 7     | 8     | 9     | 10    | >10 |
|              | %                                                                                                                                                              | 55.00 | 45.00 | 40.00 | 30.00 | 30.00 | 30.00 | 30.00 | 25.00 | 20.00 | 20.00 | -   |
|              | RM                                                                                                                                                             | 8,029 | 6,569 | 5,839 | 4,379 | 4,379 | 4,379 | 4,379 | 3,650 | 2,920 | 2,920 | -   |

|                                         |      |       |       |       |      |      |      |      |      |      |      |     |
|-----------------------------------------|------|-------|-------|-------|------|------|------|------|------|------|------|-----|
| Commission*<br>(as part of Wakalah fee) | Year | 1     | 2     | 3     | 4    | 5    | 6    | 7    | 8    | 9    | 10   | >10 |
|                                         | %    | 30.00 | 20.00 | 15.00 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | -   |
|                                         | RM   | 4,379 | 2,920 | 2,190 | 730  | 730  | 730  | 730  | 730  | 730  | 730  | -   |

Service charge  
RM1 per month

Stamp duty  
**Payable by Syarikat Takaful Malaysia Keluarga Berhad**

\* All amount in RM presented are rounded to the nearest Malaysian Ringgit (RM).

### 4 Other Key Terms

- You have a duty to take reasonable care not to provide false or inaccurate information when you apply for this rider. Failure to do so may result in the risk of having your claim rejected and/or certificate terminated.
- Please inform us immediately if something happens that may lead to a claim.
- A waiting period of 60 days applies for cancer, heart attack, coronary artery by-pass surgery, serious coronary artery disease, and angioplasty and other invasive treatments for coronary artery disease; while a 30-day waiting period applies for other critical illnesses.

**Note:** This list is **non-exhaustive**. You should refer to the certificate wording for the full list of terms and conditions.

#### ? Can I cancel my certificate?

Yes, you may cancel your certificate by giving a written notice to us.

- Free-look Period:** You may cancel your certificate by returning the certificate within 15 days after your certificate has been delivered to you. The takaful contribution that you have paid minus any medical examination expenses will be refunded to you.
- Written Notice:** If you choose to surrender your basic plan after the 15 days of the free-look period, you may request by filling in the surrender form and address it to us. This rider will also be terminated and any balance in the Participant Account ("PA") will be paid. If you wish to cancel this rider, you may request via endorsement by filling in the endorsement form and address it to us. Please note that the balance from the PA will not be paid if you decide to cancel this rider alone.

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Date: 01/06/2026

## 1 What is myPayor Plus?

myPayor Plus offers takaful protection for **20** years. It pays the future takaful contributions starting from the next contribution due date, if the participant dies, suffers total and permanent disability ("TPD"), or is diagnosed with or undergoes surgery for any of the 47 covered critical illnesses during the contribution payment term of the certificate.

This rider applies Shariah concepts like **Tabarru'**, **Wakalah**, **Jualah**, **Qard** and **Hibah**.

## 2 Know Your Coverage/Benefits

**As an illustration**, for a 30-year-old male with takaful contribution of **RM19,818.00** yearly, you will receive the following family takaful **coverage/benefits**:

|                             |                                                                                                                                                                        |
|-----------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Death/TPD/ Critical Illness | <b>RM500,000.00</b> per annum to pay for the future takaful contributions starting from the next contribution due date if any covered event occurs to the participant. |
|-----------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

The critical illnesses covered under this rider include:

1. Cancer – of specified severity and does not cover very early cancers;
2. Stroke – resulting in permanent neurological deficit with persisting clinical symptoms; or
3. Heart Attack – of specified severity.

**Note:** This list is **non-exhaustive**. Please refer to the Appendix for the full list of critical illnesses covered.

Your family takaful **excludes**:

- death due to suicide within the first year;
- TPD:
  - a) that existed before the coverage starts, or resulting from attempted suicide or self-inflicted injuries;
  - b) resulted due to aviation, gliding or any other fling activity other than as a pilot, cabin crew or flight passenger; or
  - c) resulted from breaking the law or getting injured while committing, attempting or provoking an assault or crime.
- illness:
  - a) that existed before coverage starts;
  - b) due to any condition that existed or was diagnosed during the waiting period, or after the waiting period but related to that condition except critical illness caused by injury;
  - c) where any signs or symptoms before or during the waiting period, even if the diagnosis is made after the waiting period;
  - d) caused by nuclear weapon material, ionising, radiations or contamination by radioactivity or combustion of nuclear fuel;
  - e) that happens while the person is under the influence of alcohol, drugs, or mind-altering substances; or
  - f) caused by self-inflicted injuries and physical defect.

**Note:** This list is **non-exhaustive**. You must refer to the certificate wording for the full list of exclusions.

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### 3 Know Your Obligations

**For this family takaful, you must pay a takaful contribution of:**

|                      |                    |
|----------------------|--------------------|
| Takaful Contribution | RM19,818.00 yearly |
|----------------------|--------------------|

Duration: **20** years

**You also have to pay the following fees and charges** (as part of your takaful contribution):

|              |                                                                                                                                                                |        |       |       |       |       |       |       |       |       |       |     |
|--------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-----|
| Wakalah fee* | The Wakalah fee is deducted upfront as a percentage of the takaful contribution to meet our management expenses and total distribution cost (i.e. commission). |        |       |       |       |       |       |       |       |       |       |     |
|              | Year                                                                                                                                                           | 1      | 2     | 3     | 4     | 5     | 6     | 7     | 8     | 9     | 10    | >10 |
|              | %                                                                                                                                                              | 55.00  | 45.00 | 40.00 | 30.00 | 30.00 | 30.00 | 30.00 | 25.00 | 20.00 | 20.00 | -   |
|              | RM                                                                                                                                                             | 10,900 | 8,918 | 7,927 | 5,945 | 5,945 | 5,945 | 5,945 | 4,955 | 3,964 | 3,964 | -   |

|                                         |      |       |       |       |      |      |      |      |      |      |      |     |
|-----------------------------------------|------|-------|-------|-------|------|------|------|------|------|------|------|-----|
| Commission*<br>(as part of Wakalah fee) | Year | 1     | 2     | 3     | 4    | 5    | 6    | 7    | 8    | 9    | 10   | >10 |
|                                         | %    | 30.00 | 20.00 | 15.00 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | 5.00 | -   |
|                                         | RM   | 5,945 | 3,964 | 2,973 | 991  | 991  | 991  | 991  | 991  | 991  | 991  | -   |

|                |               |
|----------------|---------------|
| Service charge | RM1 per month |
|----------------|---------------|

|            |                                                      |
|------------|------------------------------------------------------|
| Stamp duty | Payable by Syarikat Takaful Malaysia Keluarga Berhad |
|------------|------------------------------------------------------|

\* All amount in RM presented are rounded to the nearest Malaysian Ringgit (RM).

### 4 Other Key Terms

- You have a duty to take reasonable care not to provide false or inaccurate information when you apply for this rider. Failure to do so may result in the risk of having your claim rejected and/or certificate terminated.
- Please inform us immediately if something happens that may lead to a claim.
- A waiting period of 60 days applies for cancer, heart attack, coronary artery by-pass surgery, serious coronary artery disease and other invasive treatments for coronary artery disease; while a 30-day waiting period applies for other critical illnesses.

**Note:** This list is **non-exhaustive**. You should refer to the certificate wording for the full list of terms and conditions.

#### ? Can I cancel my certificate?

Yes, you may cancel your certificate by giving a written notice to us.

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## Shariah Concept

|                 |                                                                                                                                                                                                                                                                                                                                                                                                             |
|-----------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Tabarru'</b> | <ul style="list-style-type: none"> <li>• Donation for charitable purposes.</li> <li>• You donate an amount from the PA to the Participant Special Account ("Risk Fund") to help other participants.</li> <li>• Tabarru' takes into effect when you contribute to the Risk Fund.</li> </ul>                                                                                                                  |
| <b>Wakalah</b>  | <ul style="list-style-type: none"> <li>• A contract in which one party, the principal, authorises another party to act as their agent.</li> <li>• The agent will undertake a specific task on delegable matters, either with or without a fee.</li> <li>• In this plan, you grant us the authority to manage the certificate, and in exchange, we will collect a Wakalah fee and service charge.</li> </ul> |
| <b>Jua'lah</b>  | <ul style="list-style-type: none"> <li>• A contract where a party offers a reward to another party for achieving a specific result.</li> <li>• You allow us to receive 15% of the investment profit from the PA and 50% of the distributable surplus from the Risk Fund, if any, as a performance incentive for successfully managing the PA and the Risk Fund.</li> </ul>                                  |
| <b>Qard</b>     | <ul style="list-style-type: none"> <li>• A loan without any interest.</li> <li>• We will lend an amount of money to the Risk Fund without interest if the Risk Fund is in deficit to pay claim.</li> </ul>                                                                                                                                                                                                  |
| <b>Hibah</b>    | <ul style="list-style-type: none"> <li>• A transfer of ownership of an asset from a donor to a recipient(s) without any consideration.</li> <li>• The benefits payable from the Risk Fund are given as Hibah.</li> <li>• The nominee(s) may receive the benefits payable as Hibah if the nominee(s) is/are a beneficiary(ies) under conditional Hibah.</li> </ul>                                           |



## Coverage/Benefits

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                           |                                   |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------|
| <b>Accidental Events</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | The accidental events for Accidental Death are as follows:                                                                                                                                                                                                                                                                                                                                |                                   |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <b>Event</b>                                                                                                                                                                                                                                                                                                                                                                              | <b>Additional Benefit Payable</b> |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Accidental death                                                                                                                                                                                                                                                                                                                                                                          | <b>RM500,000</b>                  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Accidental death while travelling as a passenger in a Public Conveyance <sup>1</sup> or during Major Festive Season <sup>2</sup>                                                                                                                                                                                                                                                          | <b>RM1,000,000</b>                |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Accidental death while travelling outside Malaysia <sup>3</sup>                                                                                                                                                                                                                                                                                                                           | <b>RM1,500,000</b>                |
| <b>Life Celebration Events</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <sup>1</sup> Public Conveyance means licensed public transport that runs on regular routes and schedules, such as commercial airlines, buses, trains, or monorails. It does not include cable cars, taxis, hired cars, or any transport arranged for private travel.                                                                                                                      |                                   |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <sup>2</sup> In the event of death of the person covered due to a motor vehicle accident on a road occurring from 2 days before until 2 days after any of the following Major Festive Season: <ul style="list-style-type: none"> <li>a. Hari Raya Aidilfitri;</li> <li>b. Hari Raya Aidiladha;</li> <li>c. Chinese New Year;</li> <li>d. Deepavali; and</li> <li>e. Christmas.</li> </ul> |                                   |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <sup>3</sup> Death must happen within 90 days after the person covered leaving from Malaysia. If the accidental death happens after this period, only the accidental death benefit will be paid.                                                                                                                                                                                          |                                   |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | The accidental events for Accidental TPD are as follows:                                                                                                                                                                                                                                                                                                                                  |                                   |
| <b>Life Celebration Events</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <b>Event</b>                                                                                                                                                                                                                                                                                                                                                                              | <b>Additional Benefit Payable</b> |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Accidental TPD                                                                                                                                                                                                                                                                                                                                                                            | <b>RM500,000</b>                  |
| This benefit is payable in any of the following Life Celebration Events: <ul style="list-style-type: none"> <li>a. Marriage (person covered or person covered's child);</li> <li>b. Childbirth (person covered or person covered's child);</li> <li>c. Buying a property (person covered); or</li> <li>d. Graduated from tertiary education (person covered or person covered's child).</li> </ul> This benefit pays 50% of the annualised contribution, up to RM2,000 per claim, up to 5 times during the coverage term. Eligible from year 4 onwards with a 3-year waiting period between claims. |                                                                                                                                                                                                                                                                                                                                                                                           |                                   |

| <b>Benefit Payout</b>                                                                            | <p>The death/TPD benefit amount will be reduced if the claim event occurs when the person covered is below age 5 as below:</p> <table border="1"> <thead> <tr> <th>Age</th><th>Revised Amount<br/>(Percentage of benefit amount)</th></tr> </thead> <tbody> <tr><td>1</td><td>20%</td></tr> <tr><td>2</td><td>40%</td></tr> <tr><td>3</td><td>60%</td></tr> <tr><td>4</td><td>80%</td></tr> <tr><td>5</td><td>100%</td></tr> </tbody> </table>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Age                        | Revised Amount<br>(Percentage of benefit amount) | 1                                        | 20%                                      | 2                                                                         | 40%                                                                                         | 3                                                                                                | 60%                    | 4                                              | 80%                    | 5                                         | 100%                   |                  |                                                                                                  |                                                                         |                                                                     |                                           |                                     |                                                                         |                                                                                            |                                                                                          |                      |                                     |                                                                   |                                           |                                                |                                                                                           |                                                                          |                             |                      |                            |                              |                                                          |                                                         |
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| Age                                                                                              | Revised Amount<br>(Percentage of benefit amount)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                            |                                                  |                                          |                                          |                                                                           |                                                                                             |                                                                                                  |                        |                                                |                        |                                           |                        |                  |                                                                                                  |                                                                         |                                                                     |                                           |                                     |                                                                         |                                                                                            |                                                                                          |                      |                                     |                                                                   |                                           |                                                |                                                                                           |                                                                          |                             |                      |                            |                              |                                                          |                                                         |
| 1                                                                                                | 20%                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                            |                                                  |                                          |                                          |                                                                           |                                                                                             |                                                                                                  |                        |                                                |                        |                                           |                        |                  |                                                                                                  |                                                                         |                                                                     |                                           |                                     |                                                                         |                                                                                            |                                                                                          |                      |                                     |                                                                   |                                           |                                                |                                                                                           |                                                                          |                             |                      |                            |                              |                                                          |                                                         |
| 2                                                                                                | 40%                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                            |                                                  |                                          |                                          |                                                                           |                                                                                             |                                                                                                  |                        |                                                |                        |                                           |                        |                  |                                                                                                  |                                                                         |                                                                     |                                           |                                     |                                                                         |                                                                                            |                                                                                          |                      |                                     |                                                                   |                                           |                                                |                                                                                           |                                                                          |                             |                      |                            |                              |                                                          |                                                         |
| 3                                                                                                | 60%                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                            |                                                  |                                          |                                          |                                                                           |                                                                                             |                                                                                                  |                        |                                                |                        |                                           |                        |                  |                                                                                                  |                                                                         |                                                                     |                                           |                                     |                                                                         |                                                                                            |                                                                                          |                      |                                     |                                                                   |                                           |                                                |                                                                                           |                                                                          |                             |                      |                            |                              |                                                          |                                                         |
| 4                                                                                                | 80%                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                            |                                                  |                                          |                                          |                                                                           |                                                                                             |                                                                                                  |                        |                                                |                        |                                           |                        |                  |                                                                                                  |                                                                         |                                                                     |                                           |                                     |                                                                         |                                                                                            |                                                                                          |                      |                                     |                                                                   |                                           |                                                |                                                                                           |                                                                          |                             |                      |                            |                              |                                                          |                                                         |
| 5                                                                                                | 100%                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                            |                                                  |                                          |                                          |                                                                           |                                                                                             |                                                                                                  |                        |                                                |                        |                                           |                        |                  |                                                                                                  |                                                                         |                                                                     |                                           |                                     |                                                                         |                                                                                            |                                                                                          |                      |                                     |                                                                   |                                           |                                                |                                                                                           |                                                                          |                             |                      |                            |                              |                                                          |                                                         |
| <b>myProtect Booster table</b>                                                                   | <p>The additional benefit will be paid in accordance with the table below:</p> <table border="1"> <thead> <tr> <th>Year Death/TPD occurred</th><th>Additional benefit payable</th></tr> </thead> <tbody> <tr><td>Year 1 - 5</td><td><b>0%</b></td></tr> <tr><td>Year 6 - 10</td><td><b>10%</b></td></tr> <tr><td>Year 11 - 15</td><td><b>20%</b></td></tr> <tr><td>Year 16 - 20</td><td><b>30%</b></td></tr> <tr><td>Year 21 - 25</td><td><b>40%</b></td></tr> <tr><td>Year 26 - 80</td><td><b>50%</b></td></tr> </tbody> </table>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Year Death/TPD occurred    | Additional benefit payable                       | Year 1 - 5                               | <b>0%</b>                                | Year 6 - 10                                                               | <b>10%</b>                                                                                  | Year 11 - 15                                                                                     | <b>20%</b>             | Year 16 - 20                                   | <b>30%</b>             | Year 21 - 25                              | <b>40%</b>             | Year 26 - 80     | <b>50%</b>                                                                                       |                                                                         |                                                                     |                                           |                                     |                                                                         |                                                                                            |                                                                                          |                      |                                     |                                                                   |                                           |                                                |                                                                                           |                                                                          |                             |                      |                            |                              |                                                          |                                                         |
| Year Death/TPD occurred                                                                          | Additional benefit payable                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                            |                                                  |                                          |                                          |                                                                           |                                                                                             |                                                                                                  |                        |                                                |                        |                                           |                        |                  |                                                                                                  |                                                                         |                                                                     |                                           |                                     |                                                                         |                                                                                            |                                                                                          |                      |                                     |                                                                   |                                           |                                                |                                                                                           |                                                                          |                             |                      |                            |                              |                                                          |                                                         |
| Year 1 - 5                                                                                       | <b>0%</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                            |                                                  |                                          |                                          |                                                                           |                                                                                             |                                                                                                  |                        |                                                |                        |                                           |                        |                  |                                                                                                  |                                                                         |                                                                     |                                           |                                     |                                                                         |                                                                                            |                                                                                          |                      |                                     |                                                                   |                                           |                                                |                                                                                           |                                                                          |                             |                      |                            |                              |                                                          |                                                         |
| Year 6 - 10                                                                                      | <b>10%</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                            |                                                  |                                          |                                          |                                                                           |                                                                                             |                                                                                                  |                        |                                                |                        |                                           |                        |                  |                                                                                                  |                                                                         |                                                                     |                                           |                                     |                                                                         |                                                                                            |                                                                                          |                      |                                     |                                                                   |                                           |                                                |                                                                                           |                                                                          |                             |                      |                            |                              |                                                          |                                                         |
| Year 11 - 15                                                                                     | <b>20%</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                            |                                                  |                                          |                                          |                                                                           |                                                                                             |                                                                                                  |                        |                                                |                        |                                           |                        |                  |                                                                                                  |                                                                         |                                                                     |                                           |                                     |                                                                         |                                                                                            |                                                                                          |                      |                                     |                                                                   |                                           |                                                |                                                                                           |                                                                          |                             |                      |                            |                              |                                                          |                                                         |
| Year 16 - 20                                                                                     | <b>30%</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                            |                                                  |                                          |                                          |                                                                           |                                                                                             |                                                                                                  |                        |                                                |                        |                                           |                        |                  |                                                                                                  |                                                                         |                                                                     |                                           |                                     |                                                                         |                                                                                            |                                                                                          |                      |                                     |                                                                   |                                           |                                                |                                                                                           |                                                                          |                             |                      |                            |                              |                                                          |                                                         |
| Year 21 - 25                                                                                     | <b>40%</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                            |                                                  |                                          |                                          |                                                                           |                                                                                             |                                                                                                  |                        |                                                |                        |                                           |                        |                  |                                                                                                  |                                                                         |                                                                     |                                           |                                     |                                                                         |                                                                                            |                                                                                          |                      |                                     |                                                                   |                                           |                                                |                                                                                           |                                                                          |                             |                      |                            |                              |                                                          |                                                         |
| Year 26 - 80                                                                                     | <b>50%</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                            |                                                  |                                          |                                          |                                                                           |                                                                                             |                                                                                                  |                        |                                                |                        |                                           |                        |                  |                                                                                                  |                                                                         |                                                                     |                                           |                                     |                                                                         |                                                                                            |                                                                                          |                      |                                     |                                                                   |                                           |                                                |                                                                                           |                                                                          |                             |                      |                            |                              |                                                          |                                                         |
| <b>List of Critical Illnesses Covered</b>                                                        | <table border="1"> <thead> <tr> <th colspan="2">List of Critical Illnesses</th></tr> </thead> <tbody> <tr><td>1. Alzheimer's Disease / Severe Dementia</td><td>25. Major Organ / Bone Marrow Transplant</td></tr> <tr><td>2. Angioplasty and other invasive treatments for coronary artery disease*</td><td>26. Motor Neuron Disease – permanent neurological deficit with persisting clinical symptoms</td></tr> <tr><td>3. Bacterial Meningitis – resulting in permanent inability to perform Activities of Daily Living</td><td>27. Multiple Sclerosis</td></tr> <tr><td>4. Benign Brain Tumour – of specified severity</td><td>28. Muscular Dystrophy</td></tr> <tr><td>5. Blindness – Permanent and Irreversible</td><td>29. Paralysis of Limbs</td></tr> <tr><td>6. Brain Surgery</td><td>30. Parkinson's Disease – resulting in permanent inability to perform Activities of Daily Living</td></tr> <tr><td>7. Cancer – of specified severity and does not cover very early cancers</td><td>31. Primary Pulmonary Arterial Hypertension – of specified severity</td></tr> <tr><td>8. Cardiomyopathy – of specified severity</td><td>32. Serious Coronary Artery Disease</td></tr> <tr><td>9. Chronic Aplastic Anemia – resulting in permanent Bone Marrow Failure</td><td>33. Stroke – resulting in permanent neurological deficit with persisting clinical symptoms</td></tr> <tr><td>10. Coma – resulting in permanent neurological deficit with persisting clinical symptoms</td><td>34. Surgery to Aorta</td></tr> <tr><td>11. Coronary Artery By-Pass Surgery</td><td>35. Systemic Lupus Erythematosus with Severe Kidney Complications</td></tr> <tr><td>12. Deafness – Permanent and Irreversible</td><td>36. Third Degree Burns – of specified severity</td></tr> <tr><td>13. Encephalitis – resulting in permanent inability to perform Activities of Daily Living</td><td>37. Occupationally Acquired Human Immunodeficiency Virus (HIV) Infection</td></tr> <tr><td>14. End-Stage Liver Failure</td><td>38. Terminal Illness</td></tr> <tr><td>15. End-Stage Lung Disease</td><td>39. Medullary Cystic Disease</td></tr> <tr><td>16. Full-blown Acquired Immunodeficiency Syndrome (AIDS)</td><td>40. Apallic Syndrome (i.e. Persistent Vegetative State)</td></tr> </tbody> </table> | List of Critical Illnesses |                                                  | 1. Alzheimer's Disease / Severe Dementia | 25. Major Organ / Bone Marrow Transplant | 2. Angioplasty and other invasive treatments for coronary artery disease* | 26. Motor Neuron Disease – permanent neurological deficit with persisting clinical symptoms | 3. Bacterial Meningitis – resulting in permanent inability to perform Activities of Daily Living | 27. Multiple Sclerosis | 4. Benign Brain Tumour – of specified severity | 28. Muscular Dystrophy | 5. Blindness – Permanent and Irreversible | 29. Paralysis of Limbs | 6. Brain Surgery | 30. Parkinson's Disease – resulting in permanent inability to perform Activities of Daily Living | 7. Cancer – of specified severity and does not cover very early cancers | 31. Primary Pulmonary Arterial Hypertension – of specified severity | 8. Cardiomyopathy – of specified severity | 32. Serious Coronary Artery Disease | 9. Chronic Aplastic Anemia – resulting in permanent Bone Marrow Failure | 33. Stroke – resulting in permanent neurological deficit with persisting clinical symptoms | 10. Coma – resulting in permanent neurological deficit with persisting clinical symptoms | 34. Surgery to Aorta | 11. Coronary Artery By-Pass Surgery | 35. Systemic Lupus Erythematosus with Severe Kidney Complications | 12. Deafness – Permanent and Irreversible | 36. Third Degree Burns – of specified severity | 13. Encephalitis – resulting in permanent inability to perform Activities of Daily Living | 37. Occupationally Acquired Human Immunodeficiency Virus (HIV) Infection | 14. End-Stage Liver Failure | 38. Terminal Illness | 15. End-Stage Lung Disease | 39. Medullary Cystic Disease | 16. Full-blown Acquired Immunodeficiency Syndrome (AIDS) | 40. Apallic Syndrome (i.e. Persistent Vegetative State) |
| List of Critical Illnesses                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                            |                                                  |                                          |                                          |                                                                           |                                                                                             |                                                                                                  |                        |                                                |                        |                                           |                        |                  |                                                                                                  |                                                                         |                                                                     |                                           |                                     |                                                                         |                                                                                            |                                                                                          |                      |                                     |                                                                   |                                           |                                                |                                                                                           |                                                                          |                             |                      |                            |                              |                                                          |                                                         |
| 1. Alzheimer's Disease / Severe Dementia                                                         | 25. Major Organ / Bone Marrow Transplant                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                            |                                                  |                                          |                                          |                                                                           |                                                                                             |                                                                                                  |                        |                                                |                        |                                           |                        |                  |                                                                                                  |                                                                         |                                                                     |                                           |                                     |                                                                         |                                                                                            |                                                                                          |                      |                                     |                                                                   |                                           |                                                |                                                                                           |                                                                          |                             |                      |                            |                              |                                                          |                                                         |
| 2. Angioplasty and other invasive treatments for coronary artery disease*                        | 26. Motor Neuron Disease – permanent neurological deficit with persisting clinical symptoms                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                            |                                                  |                                          |                                          |                                                                           |                                                                                             |                                                                                                  |                        |                                                |                        |                                           |                        |                  |                                                                                                  |                                                                         |                                                                     |                                           |                                     |                                                                         |                                                                                            |                                                                                          |                      |                                     |                                                                   |                                           |                                                |                                                                                           |                                                                          |                             |                      |                            |                              |                                                          |                                                         |
| 3. Bacterial Meningitis – resulting in permanent inability to perform Activities of Daily Living | 27. Multiple Sclerosis                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                            |                                                  |                                          |                                          |                                                                           |                                                                                             |                                                                                                  |                        |                                                |                        |                                           |                        |                  |                                                                                                  |                                                                         |                                                                     |                                           |                                     |                                                                         |                                                                                            |                                                                                          |                      |                                     |                                                                   |                                           |                                                |                                                                                           |                                                                          |                             |                      |                            |                              |                                                          |                                                         |
| 4. Benign Brain Tumour – of specified severity                                                   | 28. Muscular Dystrophy                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                            |                                                  |                                          |                                          |                                                                           |                                                                                             |                                                                                                  |                        |                                                |                        |                                           |                        |                  |                                                                                                  |                                                                         |                                                                     |                                           |                                     |                                                                         |                                                                                            |                                                                                          |                      |                                     |                                                                   |                                           |                                                |                                                                                           |                                                                          |                             |                      |                            |                              |                                                          |                                                         |
| 5. Blindness – Permanent and Irreversible                                                        | 29. Paralysis of Limbs                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                            |                                                  |                                          |                                          |                                                                           |                                                                                             |                                                                                                  |                        |                                                |                        |                                           |                        |                  |                                                                                                  |                                                                         |                                                                     |                                           |                                     |                                                                         |                                                                                            |                                                                                          |                      |                                     |                                                                   |                                           |                                                |                                                                                           |                                                                          |                             |                      |                            |                              |                                                          |                                                         |
| 6. Brain Surgery                                                                                 | 30. Parkinson's Disease – resulting in permanent inability to perform Activities of Daily Living                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                            |                                                  |                                          |                                          |                                                                           |                                                                                             |                                                                                                  |                        |                                                |                        |                                           |                        |                  |                                                                                                  |                                                                         |                                                                     |                                           |                                     |                                                                         |                                                                                            |                                                                                          |                      |                                     |                                                                   |                                           |                                                |                                                                                           |                                                                          |                             |                      |                            |                              |                                                          |                                                         |
| 7. Cancer – of specified severity and does not cover very early cancers                          | 31. Primary Pulmonary Arterial Hypertension – of specified severity                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                            |                                                  |                                          |                                          |                                                                           |                                                                                             |                                                                                                  |                        |                                                |                        |                                           |                        |                  |                                                                                                  |                                                                         |                                                                     |                                           |                                     |                                                                         |                                                                                            |                                                                                          |                      |                                     |                                                                   |                                           |                                                |                                                                                           |                                                                          |                             |                      |                            |                              |                                                          |                                                         |
| 8. Cardiomyopathy – of specified severity                                                        | 32. Serious Coronary Artery Disease                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                            |                                                  |                                          |                                          |                                                                           |                                                                                             |                                                                                                  |                        |                                                |                        |                                           |                        |                  |                                                                                                  |                                                                         |                                                                     |                                           |                                     |                                                                         |                                                                                            |                                                                                          |                      |                                     |                                                                   |                                           |                                                |                                                                                           |                                                                          |                             |                      |                            |                              |                                                          |                                                         |
| 9. Chronic Aplastic Anemia – resulting in permanent Bone Marrow Failure                          | 33. Stroke – resulting in permanent neurological deficit with persisting clinical symptoms                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                            |                                                  |                                          |                                          |                                                                           |                                                                                             |                                                                                                  |                        |                                                |                        |                                           |                        |                  |                                                                                                  |                                                                         |                                                                     |                                           |                                     |                                                                         |                                                                                            |                                                                                          |                      |                                     |                                                                   |                                           |                                                |                                                                                           |                                                                          |                             |                      |                            |                              |                                                          |                                                         |
| 10. Coma – resulting in permanent neurological deficit with persisting clinical symptoms         | 34. Surgery to Aorta                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                            |                                                  |                                          |                                          |                                                                           |                                                                                             |                                                                                                  |                        |                                                |                        |                                           |                        |                  |                                                                                                  |                                                                         |                                                                     |                                           |                                     |                                                                         |                                                                                            |                                                                                          |                      |                                     |                                                                   |                                           |                                                |                                                                                           |                                                                          |                             |                      |                            |                              |                                                          |                                                         |
| 11. Coronary Artery By-Pass Surgery                                                              | 35. Systemic Lupus Erythematosus with Severe Kidney Complications                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                            |                                                  |                                          |                                          |                                                                           |                                                                                             |                                                                                                  |                        |                                                |                        |                                           |                        |                  |                                                                                                  |                                                                         |                                                                     |                                           |                                     |                                                                         |                                                                                            |                                                                                          |                      |                                     |                                                                   |                                           |                                                |                                                                                           |                                                                          |                             |                      |                            |                              |                                                          |                                                         |
| 12. Deafness – Permanent and Irreversible                                                        | 36. Third Degree Burns – of specified severity                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                            |                                                  |                                          |                                          |                                                                           |                                                                                             |                                                                                                  |                        |                                                |                        |                                           |                        |                  |                                                                                                  |                                                                         |                                                                     |                                           |                                     |                                                                         |                                                                                            |                                                                                          |                      |                                     |                                                                   |                                           |                                                |                                                                                           |                                                                          |                             |                      |                            |                              |                                                          |                                                         |
| 13. Encephalitis – resulting in permanent inability to perform Activities of Daily Living        | 37. Occupationally Acquired Human Immunodeficiency Virus (HIV) Infection                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                            |                                                  |                                          |                                          |                                                                           |                                                                                             |                                                                                                  |                        |                                                |                        |                                           |                        |                  |                                                                                                  |                                                                         |                                                                     |                                           |                                     |                                                                         |                                                                                            |                                                                                          |                      |                                     |                                                                   |                                           |                                                |                                                                                           |                                                                          |                             |                      |                            |                              |                                                          |                                                         |
| 14. End-Stage Liver Failure                                                                      | 38. Terminal Illness                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                            |                                                  |                                          |                                          |                                                                           |                                                                                             |                                                                                                  |                        |                                                |                        |                                           |                        |                  |                                                                                                  |                                                                         |                                                                     |                                           |                                     |                                                                         |                                                                                            |                                                                                          |                      |                                     |                                                                   |                                           |                                                |                                                                                           |                                                                          |                             |                      |                            |                              |                                                          |                                                         |
| 15. End-Stage Lung Disease                                                                       | 39. Medullary Cystic Disease                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                            |                                                  |                                          |                                          |                                                                           |                                                                                             |                                                                                                  |                        |                                                |                        |                                           |                        |                  |                                                                                                  |                                                                         |                                                                     |                                           |                                     |                                                                         |                                                                                            |                                                                                          |                      |                                     |                                                                   |                                           |                                                |                                                                                           |                                                                          |                             |                      |                            |                              |                                                          |                                                         |
| 16. Full-blown Acquired Immunodeficiency Syndrome (AIDS)                                         | 40. Apallic Syndrome (i.e. Persistent Vegetative State)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                            |                                                  |                                          |                                          |                                                                           |                                                                                             |                                                                                                  |                        |                                                |                        |                                           |                        |                  |                                                                                                  |                                                                         |                                                                     |                                           |                                     |                                                                         |                                                                                            |                                                                                          |                      |                                     |                                                                   |                                           |                                                |                                                                                           |                                                                          |                             |                      |                            |                              |                                                          |                                                         |

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|---------------------------------------------------------------------------------------------------|------------------------------------|
| 17. Fulminant Viral Hepatitis                                                                     | 41. Chronic Autoimmune Hepatitis   |
| 18. Heart Attack – of specified severity                                                          | 42. Chronic Relapsing Pancreatitis |
| 19. Heart Valve Surgery                                                                           | 43. Creutzfeldt-Jakob Disease      |
| 20. Occupationally Acquired Human Immunodeficiency Virus (HIV) Infection Due to Blood Transfusion | 44. Ebola Hemorrhagic Fever        |
| 21. Kidney Failure – requiring dialysis or kidney transplant                                      | 45. Elephantiasis                  |
| 22. Loss of Independent Existence                                                                 | 46. Poliomyelitis                  |
| 23. Loss of Speech                                                                                | 47. Progressive Scleroderma        |
| 24. Major Head Trauma – resulting in permanent inability to perform Activities of Daily Living    | 48. Severe Eisenmenger's Syndrome  |

\*Not applicable to *myWaiver* and *myPayor Plus*.

Activities of Daily Living are as follows:

- Transfer -Getting in and out of a chair without requiring physical assistance.
- Mobility -The ability to move from room to room without requiring any physical assistance.
- Continence -The ability to voluntarily control bowel and bladder functions such as to maintain personal hygiene.
- Dressing -Putting on and taking off all necessary items of clothing without requiring assistance of another person.
- Bathing/Washing -The ability to wash in the bath or shower (including getting in or out of the bath or shower) or wash by any other means.
- Eating -All tasks of getting food into the body once it has been prepared.



## Other Key Terms & Conditions

|                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
|-----------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Takaful Contribution</b> | <ul style="list-style-type: none"> <li>a) The takaful contribution depends on the entry age, gender of the person covered, contribution payment term and coverage term.</li> <li>b) The takaful contribution amount is not guaranteed and we reserve the right to revise the takaful contribution amount. We will notify you at least 30 days before it takes effect.</li> <li>c) Coverage on the person covered will take effect upon a successful payment of the first takaful contribution as stated in your e-certificate.</li> <li>d) Subsequently, your takaful contribution will be deducted automatically from the selected debit/credit card or current/savings account based on the chosen payment mode to ensure continuous protection for the person covered.</li> <li>e) Please keep the receipt, which will be emailed to you, as proof of the takaful contribution payment made.</li> </ul> |
| <b>Tabarru'</b>             | <ul style="list-style-type: none"> <li>a) Tabarru' will be deducted monthly from the PA and credited into the Risk Fund depending on the Net Sum Covered, sum covered, attained age, gender and occupational class of the person covered or the participant, where applicable.</li> <li>b) The Tabarru' amount is not guaranteed and we reserve the right to revise the Tabarru' amount. We will notify you at least 30 days before it takes effect.</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                            |
| <b>Net Sum Covered</b>      | Net Sum Covered refers to the amount, if any by which the sum covered exceeds any balance of the PA.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| <b>Grace Period</b>         | You will have 30 days from the due date to pay your takaful contribution. Your certificate will remain in-force during the grace period.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| <b>Waiting Period</b>       | <p><u>Terminal Illness</u></p> <ul style="list-style-type: none"> <li>a) 60 days for cancer, heart attack, coronary artery by-pass surgery, serious coronary artery disease and angioplasty and other invasive treatments for coronary artery disease.</li> <li>b) 30 days for critical illnesses other than the above.</li> </ul> <p><u>Vital Care</u></p> <ul style="list-style-type: none"> <li>a) 120 days for specified illness.</li> <li>b) 30 days for all illnesses other than specified illness.</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                       |
| <b>Lapse</b>                | Your certificate will lapse and no coverage will be provided when the balance in the PA is exhausted.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Reinstatement</b>        | If your certificate lapse, you may reinstate the certificate, subject to our requirements.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <b>Others</b>               | It is important that you update in the <i>myTakaful</i> Customer Portal or inform us of any changes in your contact details to ensure that all correspondences reach you on time.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |



## Exclusions

This plan does not cover the following:

|                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Death</b>                                         | <ul style="list-style-type: none"> <li>Death due to suicide within the first year.</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| <b>TPD/TPD Yearly Recovery</b>                       | <p>TPD:</p> <ul style="list-style-type: none"> <li>that existed before the coverage starts, or TPD resulting from attempted suicide or self-inflicted injuries;</li> <li>resulted due to aviation, gliding or any other fling activity other than as a pilot, cabin crew or flight passenger; or</li> <li>resulted from breaking the law or getting injured while committing, attempting or provoking an assault or crime.</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
| <b>Accidental Death/TPD/ Family Accidental Death</b> | <p>Accidental death/TPD due to:</p> <ul style="list-style-type: none"> <li>suicide, attempted suicide or self-inflicted injuries;</li> <li>aviation, gliding or any other flying activity other than as a pilot, cabin crew or flight passenger; or</li> <li>hazardous sport, or riding or driving in any kind of race or competition.</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
| <b>Death While Performing Hajj/Umrah</b>             | <ul style="list-style-type: none"> <li>Death while performing Hajj/Umrah within the first year.</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Terminal Illness</b>                              | <p>Illness:</p> <ul style="list-style-type: none"> <li>that existed before coverage starts;</li> <li>due to any condition that existed or was diagnosed during the waiting period, or after the waiting period but related to that condition except critical illness caused by injury;</li> <li>where any signs or symptoms before or during the waiting period, even if the diagnosis is made after the waiting period;</li> <li>caused by nuclear weapon material, ionising, radiations or contamination by radioactivity or combustion of nuclear fuel;</li> <li>that happens while the person is under the influence of alcohol, drugs, or mind-altering substances; or</li> <li>caused by self-inflicted injuries and physical defect.</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| <b>Vital Care</b>                                    | <p>Hospitalisation due to:</p> <ul style="list-style-type: none"> <li>conditions that existed before coverage starts;</li> <li>illness or specified illness which occurs within the waiting period.</li> <li>pregnancy-related matters, including childbirth (normal or caesarean), miscarriage, abortion, prenatal or postnatal care, birth control, infertility treatment, erectile dysfunction, sterilisation or related test or treatments;</li> <li>mental, nervous, or psychological disorders, including related physical or stress-related conditions;</li> <li>illness or injury caused by alcohol, drugs or mind-altering substances;</li> <li>war, acts of war (declared or not), criminal or terrorist act, active service in armed forces, or direct involvement in strikes, riots, civil unrest, or rebellion;</li> <li>exposure to ionising radiation, radioactive contamination from nuclear fuel, nuclear waste, or nuclear weapons;</li> <li>any illness or injury arising from breaking the law or from provoking an assault;</li> <li>suicide, attempted suicide, or self-inflicted injury;</li> <li>private flying, except when travelling as a paying passenger on a licensed commercial airline.</li> <li>illness or injury from racing (except running), hazardous sports (such as skydiving, water skiing, scuba diving, winter sports), professional sports, or illegal activities;</li> <li>Acquired Immunodeficiency Syndrome (AIDS), infection by Human Immunodeficiency Virus (HIV) or related conditions;</li> <li>which is considered as not medically necessary based on the diagnosis and treatment; or</li> <li>routine medical examination or consultation, cosmetic or dental care and treatment or plastic surgery, organ or tissue donation, gender transformation, experimental or elective surgery or congenital anomalies.</li> </ul> |
| <b>myProtect Booster</b>                             | <p>Death:</p> <ul style="list-style-type: none"> <li>due to suicide within the first year.</li> </ul> <p>TPD:</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |

|  |                                                                                                                                                                                                                                                                                                                                                                                                                         |
|--|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|  | <ul style="list-style-type: none"><li>• that existed before the coverage starts, or resulting from attempted suicide or self-inflicted injuries;</li><li>• resulted due to aviation, gliding or any other fling activity other than as a pilot, cabin crew or flight passenger; or</li><li>• resulted from breaking the law or getting injured while committing, attempting or provoking an assault or crime.</li></ul> |
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**Note:**

The above list is **non-exhaustive**. You should refer to the certificate wording for the full list of terms and conditions.

**IMPORTANT NOTES:**

**PARTICIPATING IN A FAMILY TAKAFUL PLAN IS A LONG-TERM FINANCIAL COMMITMENT. YOU MUST CHOOSE THE TYPE OF PLAN THAT BEST SUITS YOUR PERSONAL CIRCUMSTANCES. YOU SHOULD READ AND UNDERSTAND THE TAKAFUL CERTIFICATE AND DISCUSS WITH OUR SALES REPRESENTATIVE OR CONTACT SYARIKAT TAKAFUL MALAYSIA KELUARGA BERHAD DIRECTLY FOR MORE INFORMATION.**

**THE BENEFIT(S) PAYABLE UNDER ELIGIBLE CERTIFICATE IS PROTECTED BY PERBADANAN INSURANS DEPOSIT MALAYSIA (PIDM) UP TO LIMITS. PLEASE REFER TO PIDM'S TAKAFUL AND INSURANCE BENEFITS PROTECTION SYSTEM ("TIPS") BROCHURE OR CONTACT SYARIKAT TAKAFUL MALAYSIA KELUARGA BERHAD OR PIDM (VISIT [WWW.PIDM.GOV.MY](http://WWW.PIDM.GOV.MY)).**

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