TAX INVOICE

Policy Schedule

You will only be entitled to insurance cover under the section or sections which you have selected and for which you have paid the required premium.

Policy Number - PMEL99/0125735

The Insured ATHLETICS AUSTRALIA including all affiliated State Associations, Centres, Clubs

and all registered members, officials, accredited coaches, voluntary workers, executives and members of the Board of Management and/or subsidiary and/or

related Corporations

LITTLE ATHLETICS AUSTRALIA INC including all affiliated State Associations, Centres, Clubs and all registered members, officials, accredited coaches, voluntary workers, executives and members of the Board of Management and/or subsidiary

and/or related Corporations

Address Aughtie Drive Albert Park 3206 Australia

Sport/Business The principal activities of Athletics Australia are to administer, co-ordinate, promote and

develop track and field sports for athletes at centres that are affiliated with Athletics Australia, risk management and governance of sanctioned events, games, tournaments and training sessions and training camps, coaching, the rendering of first aid, provision of food and drink, publication of newsletters, sale of merchandise, property owners or property occupiers liability, social activities including awards presentations, fundraising, BBQ's and other social

gatherings and any other activity incidental thereto

The principal activities of Little Athletics Australia are to administer, co-ordinate, promote and develop track and field sports for under 17 year old children at centres that are affiliated with Little Athletics Australia, risk management and governance of sanctioned events, games, tournaments and training sessions and training camps, coaching, the rendering of first aid, provision of food and drink, publication of newsletters, sale of merchandise, property owners or property occupiers liability, social activities including awards presentations, fundraising,

BBQ's and other social gatherings and any other activity incidental thereto

Teams/Members 148885 PLAYERS

Period of Insurance From **30/04/2024** to **30/04/2025**, at 4:00 pm and any subsequent period for which the

insured shall have paid and The Underwriter(s) shall have accepted the new premium.

Cover Details

SPORTS INJURY

UNDERWRITTEN BY Certain underwriters at Lloyd's & HDI Global Specialty SE-Australia under contract number B1750L230519 & SCA/2023 respectively

Section 4.1 Capital Benefits The percentage of this amount which is Payable for each of \$100,000

Events 1 to 14 is set out in the policy

Section 4.2.1 Medical Benefits The percentage of the Medical Expenses covered under this section is 100%

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Claims: 1300 134 956 | Office: +61 (0)3 8562 9100

Email: info@sportscover.com | Post: Locked Bag 6003, Wheelers Hill, VIC 3150

ACN 006 637 903 • ABN 43 006 637 903 • AFS LICENCE NUMBER 230914

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INSURING SPORT SINCE 1986
2009, 2010 UNDERWRITING AGENCY OF THE YEAR
2014 GENERATION I YOUTH EMPLOYER OF THE YEAR



TAX INVOICE

Section 4.2.2	Physio Benefits The percentage of physiotherapy expenses covered under this S	Section is AS PER POLICY
	The Excess payable for each claim under Section 4.2 is \$ 75 Excess The maximum amount payable per claim under Section 4.2 is \$ 2,500	
Section 4.3.1	Loss of Income	\$ 700 Per Week
Section 4.3.2	Student Allowance	AS PER POLICY
Section 4.3.3	Domestic Home Help	AS PER POLICY
	The Excess Period under Section 4.3 is 7 Days The Maximum Benefit Period under Section 4.3 is 104 Weeks	
Section 4.4	All benefits excluding 4.4.1	AS PER POLICY
Section 4.4.1	Injury Assistance The maximum amount per claim is	\$ 3,000 Limit
Dollar Popofita		

Policy Benefits

4.1 Capital Benefits

It is noted that the following benefits apply:

Death and capital benefits \$100,000 Death – under 18 years of age \$25,000 Death – over 65 years 20,000 Quadriplegic and Paraplegic \$500,000 As per events to 14 in the policy wording

Additional Benefit under this section Event 15 Broken Bones:

If an Insured Person suffers an Injury resulting directly (and within 12 month of the date of Injury) in:

Broken or fractured bones

We will pay to the Insured Person the corresponding benefits specified in the benefits column below (subject to the terms and conditions of this Policy)

The Conditions The Benefits
Neck, skull or spine (full break) \$3,000
Hip \$1,500
Jaw, pelvis, leg, ankle, knee \$1,000
Cheekbone, shoulder or hairline fracture of skull or spine \$600
Arm, elbow, wrist or rib \$500
Nose or collar bone \$400
Finger, thumb, foot, hand or toe \$150

Theatre fees and other non-Medicare medical related costs will be paid as per the benefits and conditions in Section 4.2 of the policy.

In the case of and established non-union of any of the above breaks or fractures, we will pay an additional benefit of 5% of the relevant Benefit shown in the Table of Benefits above.

Where an Insured Person suffers from more than one incident of broken or fractured bones as listed above arising from any one Injury, the maximum Benefit payable shall be the largest Benefit specified in the table of Benefits for the relevant condition suffered.

4.2 Medical Expense

It is noted that the following benefits apply to Voluntary Workers 100% of expenses up to \$5000 Benefit Period 52 weeks Excess \$75



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4.3 Weekly Benefits

4.3.2 Student Allowance - Non Income Earners

The Maximum amount payable is increased from \$200 to \$500 per week.

4.3.3 Domestic Home Help - Non Income Earners

The Maximum amount payable is increased from \$200 to \$500 per week.

AN AGGREGATE DEDUCTIBLE APPLIES TO THIS POLICY

Issued subject to the terms of the attached Policy Wording and signed by the authorised Representative of Sportscover Australia Pty Ltd on behalf of the Underwriter/s detailed above.

6/05/2024

DATE

Printed by: A.B.

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