

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 – PMEL99/0097611

The Insured	TOUCH FOOTBALL AUSTRALIA INC
Address	1/18 Napier Cl Deakin 2600 Australia
Sport/Business	Touch Football
Teams/Members	132380 PLAYERS
Period of Insurance	From 30/09/2020 to 30/06/2021 , 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 under contract number B0750RNAFB1903622

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 80%

Section 4.2.2 Physio Benefits The percentage of physiotherapy expenses covered under this Section is AS PER POLICY

The Excess payable for each claim under Section 4.2 is \$ 200 Excess
The maximum amount payable per claim under Section 4.2 is \$ 3,000

Section 4.3.1 Loss of Income NOT INSURED

Section 4.3.2 Student Allowance NOT INSURED

Section 4.3.3 Domestic Home Help NOT INSURED

Section 4.4 All Benefits NOT INSURED

Benefits:

1. Capital Benefits - Death and Permanent Injuries

Compensation (as a percentage of the maximum benefit)

Bodily Injury sustained by an Insured Person during the Scope of Cover which within twelve calendar months results in:

Event Maximum Benefit \$50,000

1. Death (limited to 20% of the capital benefits in the schedule for benefit for insured persons under 18 years of age) - 100%
2. Permanent Quadriplegia - 100%
3. Permanent Paraplegia - 100%

4. Permanent Total loss of sight of both eyes - 100%
Permanent Total loss of sight of one eye - 50%

5. Total loss of hearing - two ears 75%
Total loss of hearing - one ear 25%

6. Permanent total loss of use of two arms - 75%
Permanent total loss of use of one arm - 35%

7. Permanent total loss of use of two legs - 75%
Permanent total loss of use of one leg - 35%

8. Permanent total loss of use of two + fingers - 40%
Permanent total loss of use of two fingers - 14%
Permanent total loss of use of one finger - 4%
Permanent total loss of use of one thumb - 5%

9. Permanent total loss of use of two + toes - 40%
Permanent total loss of use of two toes - 14%
Permanent total loss of use of one toe - 4%

10. Permanent total loss of two kidneys - 75%
Permanent total loss of one kidney - 30%
Permanent total loss of spleen - 25%
Permanent total loss of liver - 70%
Permanent total loss of two testicles - 40%
Permanent total loss of one testicle - 6%
Permanent total loss of sexual function - 45%

11. Total and permanent disfigurement - Up to 45%
Total and permanent shortening of leg - 7%

For the purposes of this event 11 only, disfigurement means disfigurement that extends to more than 20% of the entire external body. The total percentage paid to be at the Insurer's sole and absolute discretion.

12. Any permanent total disability or permanent total loss of use of any body part not shown above will be compensated at a percentage of the capital benefit as determined at the sole and absolute discretion of the underwriter's. Such determination will not be inconsistent with the benefits provided under Events 4-11 inclusive. - Up to 90%

13. Becoming HIV positive but cover for this event is only provided if the infection was as a direct result of playing or participating in the sport nominated in the schedule. - 10%

14. Actual non Medicare medical expenses incurred following accidental miscarriage or premature childbirth up to max 26 weeks of pregnancy. Cover for this event is only provided if the miscarriage or childbirth was as a direct result of playing or participating in the sport nominated in the schedule. - Up to 5%

Event 14 is subject to deduction of the excess specified in the schedule for Medical Benefits.

Non-Medicare Medical Expenses

Benefit: Reimbursement up to 80% of non-Medicare medical costs, up to \$3,000 per injury.

Basic Excess: \$200 each and every claim. Nil if claimant is privately insured.

Benefit Period: 52 weeks

Injury Assistance and Parents Inconvenience Allowance

Benefit: \$25 per day to a maximum of \$1,500 any one claim

Basic Excess: Nil

Funeral Expenses – the event of death arising from any cause – not just accidental during the course of the pursuit of the insured activities.

Benefit: Pays an amount not exceeding \$5,000 in respect of the Insured Person's Funeral expenses (including In Memoriam Benefit).

Rehabilitation Benefit

Benefit: Pays all reasonable costs incurred for the rehabilitation of a bodily injury by a rehabilitation provider to a maximum amount of \$500. Also pays the expenses incurred for tuition or advice from a licensed vocational school up to a maximum of \$3,000.

Bed Care Benefit

Benefit: \$300 per week for bed confinement for a period of not less than seven days

Basic Excess: 7 days

Benefit Period: 12 weeks

Dependant Children's Allowance

Benefit: Maximum amount of \$500

Home Renovation Benefit

Benefit: Up to a maximum of \$10,000 if the Insured Person is entitled to 100% of the Capital Benefit.

Membership Benefit

Benefit: Pro rata amount of the annual club membership / registration fee up to a maximum of \$500

Ancillary Non Medical Expenses

Benefit: Maximum \$1,500 payable

Kidnapping Benefit

Benefit: 10% of the Capital Benefit listed in the schedule.

Non Australian Residents

Benefits will be paid on the same basis as though Medicare applied therefore benefits that would normally attract Medicare for permanent residents will not be claimable. All benefits will cease if the claimant leaves Australia.

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.



25/02/2021

DATE

As Agreed