

# Australian Football Optional Upgrade Form

## 2024/2025 Australian Football National Risk Protection Program

### For Period: 1st November 2024 to 1st November 2025

Please note: Upgrades are effective from receipt of this form.

For General enquiries please phone 1300 130 373 and to view the Policy Wordings, Summary of Covers and other important information, terms and conditions (including the Product Disclosure Statement), please refer to <https://sport.marshadvantage.com.au/afl> or contact Marsh:

#### Post:

Marsh Pty Ltd  
GPO Box 1229  
Melbourne VIC Australia 3000

#### Email:

[sport@marsh.com](mailto:sport@marsh.com)

## Standard Covers within the Program:

### What are players covered for automatically within the National Risk Protection Program?

All Players receive the following standard covers within the Australian Football National Risk Program as per the policy wordings, terms and conditions outlined at <https://sport.marshadvantage.com.au/afl>

Standard covers provided:

- Personal Accident Cover including
  - Capital Benefits (Bronze level) maximum \$100,000 (Quadriplegia / Paraplegia max \$1,000,000)
  - Non-Medicare Medical Benefits (Bronze level) – maximum \$2,000 per claim

*Note: AFL Masters / Veterans teams do not have Personal Injury coverage as standard.*

*Such clubs can choose the Bronze or Silver level of cover via the "AFL Masters - Personal Injury Upgrade Form"*

## Loss of Income Cover Purchase for individuals

### What is Loss of Income Cover?

Loss of Income Cover is OPTIONAL and players can purchase this cover individually. Loss of Income Cover provides reimbursement for either 80% of the injured person's net weekly income less tax or the maximum amount per week as purchased by the player – whichever is the lesser. Coverage is for a maximum of 52 weeks and a 14 day elimination period applies. Please note - coverage for Match Payments is different. The elimination period is 21 days and the maximum amount you can insure for is \$500 per week (refer to Page 5 of Upgrade Form for further details).

### How do I purchase Loss of Income Cover?

1. Complete Section A and Section C of the Upgrade Form.
2. Forward the completed form to Marsh.
3. Loss of Income Purchases are valid from the date Marsh receives this form and are subject to 14 daycredit terms.

## Section A - Upgrade Details

STEP 1: PLAYER DETAILS			
1 Club Name	2 Association League		
3 Insured Player	4 Contact Phone Number		
5 Club Name	State	Post Code	
6 Email Address			
STEP 2: TOTAL AMOUNT PAYABLE			
Section B (Non-Football Related Income ) Sub-total			\$
<b>Grand Total – Total Amount Payable</b>			\$
STEP 3: PLAYER DECLARATION			
<p>I, the undersigned, declare</p> <p>(a) I have read the PDS and agree to be bound by the Rules. I am aware that the withdrawal from the Discretionary Trust Arrangement as a Member does not entitle the Member to a refund of the Total Membership Contribution in full or in part, other than any applicable return Membership Contribution in respect of the unexpired portion of the Excess of Loss Insurance Cover.</p> <p>(b) I agree to receive the PDS, FSG and annual report for this product online at <a href="https://www.marsh.com/au/services/discretionary-trusts.html">https://www.marsh.com/au/services/discretionary-trusts.html</a> or I have obtained a hard copy of the PDS and FSG. I have reviewed those documents including the "Important Information" section of the FSG.</p> <p>(c) Privacy Act implications: Upon joining the Discretionary Trust Arrangement, you as a Member, acknowledge that, as part of the financial reports, the Trustee will be declaring Members' detailed Claims data to all Members and service providers performing specific tasks on behalf of the Trust.</p>			
Name (please print)			
Sign		Date	
STEP 4: CLUB DECLARATION			
I, the undersigned, declare that I am an authorised representative of			
			Name of Club
Authorised Club/League/Association Representative's Name (Please Print)		Authorised Club/League/Association Representative's Title/Position	
		/ /	
Authorised Club/League/Association Representative's Signature		Date	
Authorised Club/League/Association Representative's Signature			
STEP 5: SUBMIT YOUR UPGRADE FORM			
Postal Address:	Marsh Pty Ltd, GPO Box 1229, Melbourne VIC Australia 3000		
Email Address:	<a href="mailto:sport@marsh.com">sport@marsh.com</a>		
STEP 6: MAKING PAYMENT			
<p>Marsh will provide you with a Tax Invoice AFTER we receive this application form which will detail the payment options. Payment must be made within 14 days of receipt of the invoice.</p> <p>If you would like to make payment for upgraded cover via monthly instalments, please tick the box below and we will send you a Pay by the Month contract for your review. If acceptable and you wish to take advantage of this offer, please complete, sign and return to us as soon as possible.</p> <p><input type="checkbox"/> Pay by the Month</p>			

## Section B - Upgrade Options And Premiums

Before signing this form, it is essential you have read and are prepared to be bound by the Product Disclosure Statement (PDS) and Financial Services Guide (FSG). For a copy of these documents and other important information, terms and conditions, please refer to: to <https://sport.marshadvantage.com.au/afli>

**Note: AFL Masters / Veterans clubs can only choose the Bronze or Silver level of cover via the separate “AFL Masters -Personal Injury Upgrade Form”**

PERIOD OF COVER	
FROM: Cover is valid from the date Marsh Sport receives this form	1st November 2024

All clubs receive as a minimum the basic level of cover (Bronze Cover) for Non-Medicare Medical benefits. Check with your League/Association as you may currently receive a higher level of cover (for example, VCFL clubs receive Silver Cover for season 2025).

TABLE (A) below demonstrates the various levels of cover available for upgrade:

**TABLE (A) Upgrades Available**

	Bronze (Basic Cover)	Silver	Gold	Platinum
Non-Medicare Medical Costs (examples include: Ambulance, Physio, Dental, Chiro, Private Hospital Accommodation)	60% Reimbursement \$2,000 max. per claim \$100 excess per claim	75% Reimbursement \$2,500 max. per claim \$75 excess per claim	90% Reimbursement \$3,500 max. per claim \$50 excess per claim	90% Reimbursement \$7,500 max. per claim \$50 excess per claim
Capital Benefits	\$100,000*	\$150,000*	\$200,000*	\$250,000*
Quadriplegia/Paraplegia Benefit	\$1,000,000 maximum	\$1,000,000 maximum	\$1,000,000 maximum	\$1,000,000 maximum

\*Capital Benefit sum in the event of an under 18 death is restricted to 20% of the applicable maximum payout of each level.

TABLE (B) below demonstrates the premium rates payable to upgrade cover:

**TABLE (B) Contribution Rates**

Upgrade from...	Per Senior / Reserve /Women's Team	Per Junior Team (U19 and below)
Bronze to SILVER	\$366.98	\$58.89
Bronze to GOLD	\$613.86	\$92.92
Bronze to PLATINUM	\$831.84	\$125.62
Silver to GOLD	\$288.44	\$77.21
Silver to PLATINUM	\$506.43	\$107.31
Gold to PLATINUM	\$274.58	\$75.90

## Non-Medicare Medical Cover Upgrade

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**Note: AFL Masters / Veterans clubs can only choose the Bronze level cover via the separate “AFL Masters - Personal Injury Upgrade Form”**

Step 1: Non-Medicare Medical Upgrade Calculation as per TABLE (B)						
Teams		Upgrading to			Cost per team	Sub-Total
<input type="checkbox"/> Seniors		<input type="checkbox"/> SILVER	<input type="checkbox"/> GOLD	<input type="checkbox"/> PLATINUM	\$	\$
	Number of Teams				Premium rate per team	No. of Teams x Rate
<input type="checkbox"/> Reserves		<input type="checkbox"/> SILVER	<input type="checkbox"/> GOLD	<input type="checkbox"/> PLATINUM	\$	\$
	Number of Teams				Premium rate per team	No. of Teams x Rate
<input type="checkbox"/> Womens		<input type="checkbox"/> SILVER	<input type="checkbox"/> GOLD	<input type="checkbox"/> PLATINUM	\$	\$
	Number of Teams				Premium rate per team	No. of Teams x Rate
<input type="checkbox"/> Juniors (U19 and below)		<input type="checkbox"/> SILVER	<input type="checkbox"/> GOLD	<input type="checkbox"/> PLATINUM	\$	\$
	Number of Teams				Premium rate per team	No. of Teams x Rate

Step 2: Section B Total Amount Payable (Non-Medical Medical)		Total
Total Non-Medicare Medical upgrade/s		\$
Section C (Football Income – Match Payments) Sub-total		\$

If you wish to purchase Loss of Income cover, please proceed to Section C on page 5 and forward all of Sections A, B and C to Marsh Sport. If you do not wish to purchase Loss of Income cover, please forward Sections A and C only to Marsh Sport.

## Section C – Non - Football Loss of Income Cover Purchase - Teams

Loss of Income Cover is OPTIONAL.

It provides weekly income lost by players should they be injured whilst involved in a football related activity (NOT including match payments).

**Note: This coverage is not currently available to AFL Masters / Veterans Teams.**

To purchase this cover, please complete Steps 1-3 below. Missing information may result in delays with your application for Loss of Income cover.

### Important Information:

- All rates on this form are inclusive of all government charges, GST and fees.
- The players are only covered whilst representing the club noted on this form.
- The benefit payable is limited, subject to the Trustee's discretion, to the lesser of the selected amount or 80% of net weekly earnings (excluding any remuneration from participation in football). Please note that actual payments made to the claimant are made net of tax.
- No benefit will be payable if the player is not in Permanent or Regular Casual employment at the time of receiving the injury - also subject to the Trustee's discretion.
- The elimination period applicable is 14 days.
- If you do not wish to cover all teams within the club, a list of the players (per team) must be provided at the time of application (attached to this form). The team(s) to be covered must be nominated by the club (i.e. "A Grade") and only the players listed will be covered.
- Players are also covered whilst training, therefore it is important to submit this form and payment early to ensure pre-season training sessions are covered.

PERIOD OF COVER	
FROM: Cover is valid from the date Marsh Sport receives this form	1st November 2024

TABLE (C) Loss of Income Contribution Rates for Teams	
Team	Per \$50.00 Cover
Seniors/Reserves/Women's	\$666.16
Juniors (U19 and below)	\$178.97

Step 1: Loss of Income Cover Calculation - refer to TABLE (C)									
Column A Grade	Column B Income Cover	Column C Number of Units	Column D Premium Rate	Column E Teams	Column F Sub Total				
<input type="checkbox"/> Seniors	\$	÷ \$50 =		× \$666.16 =	\$	×		=	\$
	Weekly Cover		No. of \$50.00 units				Number of Teams		Premium payable
<input type="checkbox"/> Reserves	\$	÷ \$50 =		× \$666.16 =	\$	×		=	\$
	Weekly Cover		No. of \$50.00 units				Number of Teams		Premium payable
<input type="checkbox"/> Womens	\$	÷ \$50 =		× \$666.16 =	\$	×		=	\$
	Weekly Cover		No. of \$50.00 units				Number of Teams		Premium payable
<input type="checkbox"/> Juniors	\$	÷ \$50 =		× \$178.97 =	\$	×		=	\$
	Weekly Cover		No. of \$50.00 units				Number of Teams		Premium payable

This section of cover provides coverage for Non-Football Related Income only (i.e. income earned from full-time, part-time or casual employment) and does NOT include coverage for match payments.

## Section C – Loss of Income Cover Purchase - Individuals

### Non-Football Related Income

Loss of Income Cover for Individuals may be purchased in addition to the team cover on page 5.

The amount selected below will be in addition to any coverage taken out by the club and a 14 day elimination period will apply.

This section of cover provides coverage for Non-Football Related Income only (i.e. income earned from full-time, part-time or casual employment).

**TABLE (D) Loss of Income Rates for Individuals (non-football related income)**

GRADE		PER \$50.00 COVER				
Senior/Reserve/Womens Players		\$104.28				
Junior Players (U19 and below)		\$36.03				
STEP 2: LOSS OF INCOME COVER CALCULATION FOR INDIVIDUAL PLAYERS (NON-FOOTBALL RELATED INCOME) – REFER TO TABLE (D) ABOVE						
Grade	Player's Full Name	Date of Birth	Player's Occupation	Income Cover	Number Of Units	Sub Total
Senior	John Smith	11/07/1975	Bricklayer	\$500.00 per week	10 units	\$1042.80
Junior	Joe Bloggs	07/11/1991	Apprentice Carpenter	\$300.00 per week	6 units	\$216.18
<b>SECTION C TOTAL AMOUNT PAYABLE</b>					<b>TOTAL</b>	
<b>Section C Total</b>					<b>\$</b>	

**Post:**

Marsh Pty Ltd  
GPO Box 1229  
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- Players are also covered whilst training, therefore it is important to submit this form and payment early to ensure pre-sea son training sessions are covered.

## Section C – Loss of Income Cover Purchase – Football Income – Match Payments

Loss of Income Cover is now available for Individuals who earn money from playing football (i.e. match payments). Five coverage options are available (refer below). Please tick the level of cover that you require.

### IMPORTANT INFORMATION – PLEASE READ

A **21 day** elimination period applies for this section of cover

The maximum amount that can be covered is \$500 per week (gross earnings) The benefit period is for the 2025 football season only

**TABLE (E) Loss of Income Rates for Individuals (football income)**

		WEEKLY COVER (GROSS EARNINGS)		COST (PER SEASON)		
Option 1		\$100 cover per week		\$204.94		
Option 2		\$200 cover per week		\$409.88		
Option 3		\$300 cover per week		\$614.82		
Option 4		\$400 cover per week		\$819.76		
Option 5		\$500 cover per week		\$1024.70		
<b>STEP 3: LOSS OF INCOME COVER CALCULATION FOR INDIVIDUAL PLAYERS (FOOTBALL INCOME – MATCH PAYMENTS)</b>						
Player's Full Name	Date of Birth	Option 1 \$100/week	Option 2 \$200/week	Option 3 \$300/week	Option 4 \$400/week	Option 5 \$500/week
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>SECTION C TOTAL AMOUNT PAYABLE</b>					<b>TOTAL</b>	
Loss of Income Team Purchase (Step 1)					\$	
Loss of Income Individual Purchase – Non Football Related Income (Step 2)					\$	
Loss of Income Individual Purchase – Football Income (Step 3)					\$	
<b>Section C Total</b>					<b>\$</b>	

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- Players are also covered whilst training, therefore it is important to submit this form and payment early to ensure pre-sea sontraining sessions are covered.

The Asset Protect and Personal Injury covers are each provided through a Discretionary Trust Arrangement. Each Discretionary Trust Arrangement is issued by the Trustee, JLT Group Services Pty Ltd (ABN 26 004 485 214, AFSL 417964) ("JGS"). Any advice or dealing in relation to the Discretionary Trust Arrangement is provided by JLT Risk Solutions Pty Ltd (ABN 69 009 098 864, AFSL 226 827) ("JLT"). The cover provided by the Discretionary Trust Arrangements is subject to the Trustee's discretion and/or the relevant policy terms, conditions and exclusions.

Marsh Advantage Insurance Pty Ltd (ABN 31 081 358 303, AFSL 238369) ("MAI") arranges and provides any advice in relation to general insurance products (i.e. not the Discretionary Trust Arrangement) and is not the insurer.

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