

26 053 335 952 238261 ahi@ahiinsurance.com.au www.ahiinsurance.com.au 1800 618 700 1800 618 755

POLICY SCHEDULE

As at 30/08/2023, the following cover is in place:

This Policy Schedule is confirmation that cover has been issued by Accident & Health International Underwriting Pty Ltd (AHI). This Policy Schedule is also a Certificate of Currency.

0010501		
Cricket Clubs Australia		
Inception Date:	30/06/2023 at 4:00 pm (local standard time)	
Expiry Date:	30/06/2024 at 4:00 pm (local standard time)	
Marsh Sport		
Sports Insurance	2	
	Cricket Clubs Au Inception Date: Expiry Date: Marsh Sport	



Benefit Period

Broken / Fractured Bones Benefits

ABN: AFS Licence No: Email: Website: Freecall: Freefax: 26 053 335 952 238261 ahi@ahiinsurance.com.au www.ahiinsurance.com.au 1800 618 700 1800 618 755

52 Weeks

\$0

Product: Sports Insurance

Policy Wording:	SP 05102021	
Territorial Limits:	Worldwide	
	Category A	
Insured Persons Definition:	All players, prospective players, officials, volunteers (including National and State Volunteers), club and association appointed umpires, coaches, directors, officers, committees, sub-committees, regional boards and work experience students.	
Scope of Cover Definition:	 The coverage afforded by this policy shall only apply whilst an Insured Person is: Playing in club and representation games, competitions or performances organised by The Insured, or Participating in training or practice sessions or official functions arranged by The Insured, or Travelling directly to or from club and representative games, competitions or performances, training or practice sessions arranged by The Insured unless the Injury is covered under any State or Commonwealth Act, or Engaged in activities connected with The Sport specified in the Schedule whilst staying away from Your home during a tour for the purposes of participating in representative matches, or Engaged in organised social or administrative activities of the Insured. 	
	General Limits	
Limit Type Aggregate Limit of Liability Aggregate Limit of Liability per Event for Charter Flights / Non-Scheduled Flights Maximum Age Limit (sub-limits may apply) Policy Currency		Limitatior \$10,000,000 \$1,000,000 100 AUD
	Schedule of Benefits	
Dopofit Tupo / Limit Tupo		
Benefit Type / Limit Type Death and Capital Benefits Maximum payable for In Weekly Injury Benefit Income Limitation Deferral Period		Sum Insured / Limitation \$250,000 \$20,000 \$500 85% 14 Days



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ABN:

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Accidental HIV Infection Lump Sum Benefit	\$0
Bed Care Benefit	\$1,400
Benefit Period	14 Days
Daily Benefit	\$100
Domestic Help Benefit	\$500
Expense Limitation	100%
Deferral Period	14 Days
Benefit Period	52 Weeks
Family Accommodation and Transport Expenses Benefit	\$3,000
Daily Benefit	\$214.28
Benefit Period	14 Days
Funeral Expenses Benefit	\$9,000
Home and Vehicle Modification Benefit	\$5,000
Expense Limitation	100%
Non-Medicare Medical Expenses	\$5,000
Expense Limitation	85%
Excess	\$50
Out of Pocket Expenses Benefit	\$0
Retraining and Rehabilitation Expenses Benefit	\$0
Student Tutorial Benefit	\$500
Expense Limitation	100%
Deferral Period	14 Days
Benefit Period	52 Weeks
Unexpired Membership Benefit	\$200
Childcare Benefit	\$13,000
Loss of Teeth or Dental Procedures	\$5,000
Maximum payable per Tooth	\$250



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Product Endorsements

Full Insured Name

JLT (Australian Cricket) Discretionary Trust including all Australian Cricket Clubs, Affiliations and Associations, participating within organised club competitions of each State and Territory Body (excluding the elite National and State elite representative duties and cricket blast) including subsidiary or controlled companies now or previously existing or hereafter formed or acquired.

Childcare Benefit

Extent of Cover

If, during the Period of Insurance and occurring within the Scope of Cover, an Insured Person sustains an Injury which results in a Claim which We accept against this Policy for one of the following Insured Events under Death and Capital Benefits:

- Permanent Total Disablement; or
- Paraplegia/Quadriplegia; or
- Permanent and incurable paralysis of all limbs; or
- Permanent and incurable insanity; or
- Permanent total loss of sight in:
 - 1. Both eyes; or
- 2. One (1) eye; or
- Permanent total Loss of Use of:
 - 1. Two (2) limbs; or
 - 2. One (1) limb; or
- Permanent total Loss of Use of:
 - 1. The lens in both eyes; or
 - 2. Hearing in both ears,

and as a result incurs expenses relating to childcare services for their Dependent Children, which are not otherwise excluded in this Benefit, We will pay the Compensation in accordance with the terms set out in this Benefit.

Compensation

We will pay for or reimburse the reasonable expenses as described in the Extent of Cover. The maximum amount We will pay is shown in the Policy Schedule against "Childcare Benefit".

The Compensation is subject to any Benefit Limits applicable to this Benefit.

Conditions

1. The childcare services must be provided by a trained and registered childcare provider.

Exclusions

1. No cover is provided for expenses that would have been incurred irrespective of the Injury.

Loss of Teeth or Dental Procedures

Extent of Cover



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If, during the Period of Insurance and occurring within the Scope of Cover, an Insured Person sustains an Injury which results in any of the following Insured Events which are not otherwise excluded in this Benefit, We will pay the Compensation in accordance with the terms set out in this Benefit.

Insured Events Percentage of Benefit Payable

Loss of Teeth or full capping of Teeth: 100% Partial capping of Teeth: 50%

Compensation

We will pay the Percentage of Benefit Payable stated for the Insured Event, of the amount shown in the Policy Schedule against "Loss of Teeth or Dental Procedures".

Conditions

1. The maximum amount We will pay for any one Tooth is shown in the Policy Schedule against "Maximum per Tooth".

2. The maximum Compensation payable for any one Injury is the amount shown in the Policy Schedule against "Loss of Teeth or Dental Procedures".

Exclusions

1. No cover is provided for any Pre-Existing Condition.

Changes to Death and Capital Benefits Extent of Cover

The following Extent of Cover against Death and Capital Benefits shall read as follows and not as stated in the Policy Wording:

If, during the Period of Insurance and occurring within the Scope of Cover, an Insured Person sustains an Injury which results in any of the following Insured Events which are not otherwise excluded in this Benefit, We will pay the Compensation in accordance with the terms set out in this Benefit.

Insured Events | Percentage of Benefit Payable

- Death | 40%
- Permanent Total Disablement | 100%
- Paraplegia/Quadriplegia | 100%
- Permanent and incurable paralysis of all limbs | 100%
- Permanent and incurable insanity | 80%
- Permanent total loss of sight in:
- a. Both eyes | 40%
- b. One (1) eye | 40%
- Permanent total Loss of Use of:
- a. Two (2) limbs | 40%
- b. One (1) limb | 40%
- Permanent total Loss of Use of:
- a. The lens in both eyes | 40%
- b. Hearing in both ears | 30%
- Permanent total Loss of Use four fingers and thumb of either hand | 32%
- Permanent total Loss of Use of four fingers of either hand | 20%
- Permanent total Loss of Use of:
- a. The lens in one (1) eye | 24%
- b. Hearing in one (1) ear | 12%



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- Burns:

- a. Third degree burns and/or resultant disfigurement which covers more than 40% of the entire external body | 20%
- b. Second degree burns and/or resultant disfigurement which covers more than 40% of the entire external body | 10%
- Permanent total Loss of Use of one thumb of either hand:
- a. both joints | 12%
- b. one (1) joint | 2%
- Permanent total Loss of Use of fingers of either hand:
- a. three (3) joints | 4%
- b. two (2) joints | 3.2%
- c. one (1) joint | 2%
- Permanent total Loss of Use of toes of either foot:
- a. all one (1) foot | 6%
- b. great both joints | 2%
- c. great one (1) joint | 1.2%
- d. other than great, each toe | 0.4%
- Fractured leg or patella with established non-union | 4%
- Shortening of leg by at least 5cm | 3%
- Permanent total Loss of Use of:
- a. Liver | 30%
- b. Two Kidneys | 30%
- c. One Kidney | 14%
- d. Sexual Function | 18%
- e. Two Testicles | 16%
- f. One Testicle | 3%
- g. Spleen | 12%

Unspecified Permanent Disablement

For permanent disablement not otherwise provided for under the above mentioned insured Events, a percentage will be determined by the opinion of not less than three (3) Medical Practitioners, the first shall be the Insured Person's treating Medical Practitioner and the other two shall be appointed by Us. If there is disagreement between the Medical Practitioners, then the percentage to be awarded shall be taken as the average of the three opinions. The maximum Compensation payable for Unspecified Permanent Disablement is 40% of the Sum Insured shown in the Policy Schedule against Death and Capital Benefits.

Client Specific Endorsements

Heart Attack Benefit

Extent of Cover

If, during the Period of Insurance and occurring within the Scope of Cover, an Insured Person suffers a Heart Attack as defined, which are not otherwise excluded in this Benefit, We will pay the Compensation in accordance with the terms set out in this Benefit.

Compensation

We will pay up to the maximum amount shown below:

- a. You are 25 years or under (limited to \$50,000)
- b. You are aged 26 to 30 years (limited to \$25,000)
- c. You are aged 31 to 40 years (limited to \$10,000)
- d. You are aged 41 years or over (limited to \$5,000)



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Conditions

1. For the purpose of this Benefit a Heart Attack (Myocardial Infarction) means the sudden occurrence of coronary thrombosis resulting in the Death of the Insured Person.

2. The Insured Person must not be aware of any congenital defect or Pre-Existing Condition that would render the Insured Person to be more susceptible in any way to a Heart Attack.

3. The Heart Attack must occur while the Insured Person is physically engaged in training or physically participating in an official game organised by the Insured.

4. The attending Medical Practitioner must certify that the Heart Attack was not related to any congenital defect or Pre-Existing Condition.

Exclusions

No specific exclusions apply to this Benefit, only the General Exclusions.

Changes to Benefit Exclusions

The following exclusion is included in addition to the exclusions in the Policy Wording against Non-Medicare Medical Expenses:

1. No cover is provided for any expenses incurred outside of Australia.

2. No cover is provided for any expenses incurred by an Insured Person who is not an Australian citizen which would have otherwise been covered under Medicare.

3. Compensation will ceases as soon as You resume playing sport

Changes to AHI Standard Definitions

The definition of ANNUAL AGGREGATE DEDUCTIBLE shall read as follows and not as stated in the Policy Wording:

ANNUAL AGGREGATE DEDUCTIBLE means the amount shown in the Policy Schedule that the Insured is responsible to pay for all claims incurred in any one (1) Period of Insurance. When this amount is reached in any one (1) Period of Insurance, We will then reimburse the Insured for any valid claim over this amount, subject to all other terms, limits, conditions and exclusions of the Policy.

ANNUAL AGGREGATE DEDUCTIBLE \$15,000 any one Event \$1,351,250 in the aggregate