

## ENTERTAINMENT ASSOCIATION OF COMMUNITY THEATRE INSURANCE

CONTACT DETAILS			
Insured Name:			
Primary contact:			
Postal Address:			
Suburb:	State:	Postcode:	
Physical Address:			
Suburb:	State:	Postcode:	
Telephone:	Mobile Number:		
Email Address:			
ABN:			
Is this Proposer registered for GST?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	
ASSOCIATION OF COMMUNITY THEATRE INSURANCE			
1. Are you a current ACT (or affiliate) member?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	
<p><i>If you are based in New South Wales, Australian Capital Territory, South Australia or Northern Territory you must be a member of ACT Inc. to purchase any of the below policies. If you are based in another State you must be a member of an affiliate association in that State or, if you prefer, become a member of ACT Inc. Affiliate Associations are: WA – Independent Theatre Association; VIC &amp; TAS - Victorian Drama League and Musical Theatre Victoria; QLD – Gold Coast Theatre Alliance and Sunshine Coast Theatre Alliance.</i></p>			
2. Turnover and estimated revenue from your activities and performances for the next 12 months?			
\$			
3. Please <i>tick</i> your coverage option below. (Note. Premium savings to package solutions)			
	<b>Premium</b>	<b>Package Savings</b>	
<input type="checkbox"/> Public & Products Liability (PL)	\$860	\$ -	
<input type="checkbox"/> Voluntary Workers Personal Accident Cover (VWPA)	\$660	\$ -	
<input type="checkbox"/> Money	\$140	\$ -	
<input type="checkbox"/> Package Price (PL + VWPA + Money)	\$1,295	\$ 365	
<input type="checkbox"/> Package Price (PL + VWPA)	\$1,155	\$ 365	
<input type="checkbox"/> Package Price (PL + Money)	\$990	\$ 10	
Would you like to be contacted to discuss coverage for any other insurance (e.g. Property, Equipment, Management Liability etc.)?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	

**YOUR DUTY OF DISCLOSURE & PREVIOUS HISTORY**

Have you made any claims in the past 5 years (Whether insured or not):	<input type="checkbox"/> YES	<input type="checkbox"/> NO
You ever had insurance cancelled or refused:	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Have any proposal or renewal for insurance ever been declined?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
If you have answered yes to any of the above please advise details:		

**DECLARATION AND SIGNATURE**

**IMPORTANT:**

I/We understand the policy price cannot be pro-rata and has a common due date of the 31<sup>st</sup> December regardless of the time of application. Accordingly, if the policy is purchased after the 31<sup>st</sup> December, it is NOT an annual policy. This is non-negotiable. Policy is minimum and deposit premium, which means that no refund will be given upon cancellation once policy is in place.

I/We have read and agreed to the appropriate policy wordings and financial services guide provided.

I have read and accept the above declaration

Signature:	
Name (PRINT):	
Position / Title (If applicable):	
Date:	

Call us on 1300 655 931 or visit [www.marsh.com/au/entertainment](http://www.marsh.com/au/entertainment) for more information  
Please email this completed form to [act.insurance@marsh.com](mailto:act.insurance@marsh.com)

## DUTY OF DISCLOSURE

Before you enter into an insurance contract, you have a duty of disclosure under the *Insurance Contracts Act 1984* (Cth) to tell us anything that you know, or could reasonably be expected to know, may affect the insurer's decision to insure you and on what terms. You have this duty until the contract of insurance is entered into. You have the same duty before you renew, extend, vary or reinstate an insurance contract.

If we ask you questions that are relevant to the insurer's decision to insure you and on what terms, you must tell us anything that you know and that a reasonable person in the circumstances would include in answering the questions. Also, we may give you a copy of anything you have previously told us and ask you to tell us if it has changed. If we do this, you must tell us about any change or tell us that there is no change. If you do not tell us about a change to something you have previously told us, you will be taken to have told us that there is no change.

You do not need to tell us anything that: reduces the risk insured, or is common knowledge, or the insurer knows or should know as an insurer; or the insurer waives your duty to tell them about.

### **If you do not tell us something:**

If you do not tell us anything you are required to, the insurer may cancel your contract or reduce the amount it will pay you if you make a claim, or both. If your failure to tell us is fraudulent, the insurer may refuse to pay a claim and treat the contract as if it never existed.

If you are in any doubt as to the extent of the duty of disclosure or whether a piece of information ought to be disclosed, just contact your Marsh Client Risk Adviser.

## MARSH COLLECTION STATEMENT

In accordance with the *Privacy Act 1988* (Cth) (and subsequent amendments) ('the Privacy Act'), we, Marsh Pty Ltd and our Associated Entities (as that term is defined in the *Corporations Act 2001* (Cth)) ('Marsh') draw your attention to the following:

- We may collect personal information about you by means of the enclosed document.
- We are collecting the information principally for the purpose of approaching the (re)insurance market, placing insurance, assessing and advising you on your insurance needs, claims handling or risk management (depending on your requirements). Other purposes include providing you with information about other Marsh products or services and administering payments to you. If you are proposing for or renewing insurance, the information is required pursuant to your duty of disclosure under the *Insurance Contracts Act 1984* (Cth), the *Marine Insurance Act 1909* (Cth) or at common law.
- The information we collect may be disclosed to third parties including but not limited to (re)insurers, insurance intermediaries, service providers, finance providers, advisers, agents and Marsh's Associated Entities, which are all businesses of Marsh & McLennan group of companies ('MMC').
- Your personal information may be sent to our administrative processing centres in Mumbai (India) or Kuala Lumpur (Malaysia) and to other MMC companies, insurers, reinsurers and other third party service providers (e.g. data storage providers) in the United Kingdom, Singapore, Hong Kong, the United States of America and elsewhere.
- If you provide us with personal information about other individuals, you must ensure that those persons have been made aware of the above matters. Where the information collected relates to health, criminal record or other sensitive information as defined in the Privacy Act, you must obtain it with the individual's consent.
- We will use and disclose your personal information in accordance with our Privacy Policy. By completing this form you confirm that you have read the Marsh Privacy Policy available on our website ([www.marsh.com.au](http://www.marsh.com.au)) and you authorise and consent to Marsh collecting, holding, using and disclosing any personal information collected by means of the enclosed document in accordance with the terms of the Marsh Privacy Policy, including for the purposes explained in this collection statement above. If there are any inconsistencies between the terms of this collection statement and the terms of the Marsh Privacy Policy, the terms of the Marsh Privacy Policy prevail to the extent of that inconsistency. You may modify or withdraw your consent at any time. If you do not give us consent or subsequently modify or withdraw your consent, we may not be able to provide you with the products or services you want.

For further information contact your account executive or the Marsh Privacy Officer.

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