

## 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 – PMEL99/0133026

<b>The Insured</b>	<b>GYMNASTICS AUSTRALIA LIMITED AND ALL STATE ASSOCIATIONS AND AFFILIATED CLUBS</b>
<b>Address</b>	Level 3, 100 Albert Road South Melbourne 3205 Australia
<b>Sport/Business</b>	Gymnastics
<b>Teams/Members</b>	220007 SENIOR PLAYERS
<b>Period of Insurance</b>	From <b>1/11/2023</b> to <b>31/12/2024</b> , 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 Events 1 to 14 is set out in the Policy \$ 100,000

It is hereby agreed and declared that with effect from inception the policy is amended as follows:

#### 2. Words with Special Meanings

2.9 is deleted and replaced with the following;

Definition of the Insured Includes:

- Gymnastics Australia Limited and its eight Association (State/Territory) Members.
- Club Members who are affiliated with Gymnastics Australia, through their membership of one of the eight Association (State/Territory) Members, and who have chosen to opt-in to the National Insurance Program.
- Registered Participant Members and Registered Technical Members.
- Prospective Participant Members for up to four weeks after initial contact/participation.
- Guest Participants.
- Non-participating carers, officials and administrators including voluntary workers.

Definition of Insured Person Means:

Within the definition of insured organisations, all

- Paid and unpaid (volunteer) employees and staff;
- Registered participating and non-participating members;
- Officials, including but not limited to committee members, office bearers, medical officers;
- Technical Members (i.e., coaches and judges) and prospective members; and
- Prospective Participant Members for up to four weeks after initial contact/participation.
- Guest Participants.
- Non participating carers, officials and administrators.

Scope of Cover Means:

Principally but not limited to administration, organisation, promotion, product sales, office and facility occupiers, and all activities normally associated with the sport of Gymnastics.

Such activities shall include but are not limited to coaching, practice and training, coaching clinics, holiday and school clinics, "come and try"

days, "bring a friend" days, birthday parties (and other similar functions), Parkour, seminars and meetings, hire of facilities, course delivery, teacher education, working bees, and organised fundraising. Such activities shall also include events, competitions, displays and performances that are sanctioned by Gymnastics Australia or by the Association (State/Territory) Member.

All duties undertaken within the business of the insured must be undertaken with the approval of Gymnastics Australia and or the Association (State/Territory) Member, according to published policies, procedures or position statements, or by formal approval mechanism established by Gymnastics Australia and or the Association (State/Territory) Member.

#### **SCHEDULE OF BENEFITS The Events (as per Policy) Each Insured Person**

(Death and/or partial disablement caused by injury - as per Table of Insured Events)

Insured Persons \$100,000

Insured Persons - Death Under 18 \$20,000

Insured Persons - 65 to 85 years old \$20,000

Insured Persons - Quadriplegia / Paraplegia \$250,000

#### **Table of Benefits**

1. Death Under 18 years and over 65 years 100% 20%
2. Permanent total disablement 100%
3. Permanent disability not otherwise provided The percentage we determine as being consistent with the compensation provided in this table but not exceeding 75%
4. Permanent paraplegia 100%
5. Permanent quadriplegia 100%
6. Permanent unsound mind to the extent of legal incapacity 100%
7. Permanent and incurable paralysis of all limbs 100%
8. Permanent total loss of the entire sight of one or both eyes 100%
9. Permanent total loss of hearing in both ears 100%
10. Permanent total loss of the use of both hands 100%
11. Permanent total loss of the use of both arms 100%
12. Permanent total loss of the use of both feet 100%
13. Permanent total loss of the use of both legs 100%
14. Permanent total loss of the use of one hand and one foot 100%
15. Permanent total loss of the use of one hand and one arm 100%
16. Permanent total loss of the lens of one eye 50%
17. Permanent total loss of the hearing in one ear 50%
18. Permanent total loss of the use of one foot or one leg 50%
19. Permanent total loss of the use of four fingers and thumb 75%
20. Permanent total loss of the use of four fingers of either hand 40%
21. Permanent total loss of the use of one thumb, both joint 30%
22. Permanent total loss of the use of one thumb, one joint 15%
23. Permanent total loss of the use of a finger, three joints 10%
24. Permanent total loss of the use of a finger, two joints 8%
25. Permanent total loss of the use of a finger, one joint 5%
26. Permanent total loss of the use of all the toes of one foot 15%
27. Permanent total loss of the use of great toe, both joints 5%
28. Permanent total loss of the use of great toe, one joint 3%
29. Permanent total loss of the use of other toe, (each toe) 1%
30. Third degree burns and/or resultant disfigurement which covers more than 40% of the entire body 50%

AGGREGATE LIMIT OF LIABILITY \$5,000,000

Non-Australian Resident Extension General Condition 3 (the third paragraph) is deleted and replaced as follows:

Please note that cover applies to medical treatment received within Australia only. Medical cover only applies to items that do not have a Medicare item number attached to them, regardless of whether the Insured Person qualifies for Medicare or not. Weekly Benefit cover does not extend to income generated from any Occupation conducted outside of Australia. Any payment for Weekly Benefits or Medical Benefits will cease once 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.



23/11/2023

**SIGNATURE**

**DATE**

Premium as agreed

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