

TEE-BALL ASSOCIATION OF WESTERN AUSTRALIA

**INSURANCE
2010-2011**

Dear Secretary,

Please find attached the Tee-Ball Insurance Plan for the season 2010-2011.

Clubs **MUST** be affiliated before Insurance **WILL** be accepted.

Please include 2-3 officials per Club team from your weekly competition.

Public & Products Liability limit is \$10,000,000

The Professional Indemnity limit is \$2,000,000.

If you wish to partake of this cover, please fill in the form below and return to T.B.A.W.A. with the payment.

T.B.A.W.A. strongly suggests that you insure sufficient officials per team.

WARREN LAKE
SECRETARY.

To the Secretary
T.B.A.W.A.

Please insure the following numbers of players and officials through Sportscover Insurance.

Please make all cheques payable to **McKenna Hampton Insurance Brokers Pty Ltd.**

All payments are to be posted to **T.B.A.W.A. P.O. Box 328, Wembley W.A. 6913**

Name of Club: _____

| | | | |
|---------------------|----------------------|----------|----------------------|
| Number of Players | <input type="text"/> | @ \$1.95 | <input type="text"/> |
| Number of Officials | <input type="text"/> | @ \$5.50 | <input type="text"/> |
| | | Total | <input type="text"/> |

Signed: _____ Position: _____

All premiums due by 31st October 2010.

Note: 10% loading applies for Clubs/Associations that do not have the premium and completed forms to TBAWA by the 16th of November 2010 (this does not apply to Clubs/Associations situated in the North West of W A or who's season runs at a different time to the Metropolitan Clubs/Associations)

PERSONAL ACCIDENT

AND

SPORTS LIABILITY INSURANCE

FOR

TEE-BALL ASSOCIATION OF WESTERN AUSTRALIA

2010 - 2011 SEASON

PREPARED BY

MCKENNA HAMPTON INSURANCE BROKERS PTY LTD

PERSONAL ACCIDENT INSURANCE PLAN

Insured Persons

All playing members, their coaches/umpires/scorers/managers and other officials

Scope of Cover

Cover is provided while participating or conducting voluntary work for the insured Clubs including benefits during direct travel to the venue.

SECTION 1 - CAPITAL BENEFITS

The events

The Compensation

Injury as defined, resulting in:

| Item | Description | <u>ADULTS</u> | <u>JUNIORS</u> (Under 18) |
|-------------|---|----------------------|---|
| 1. | Death | \$50,000 | \$10,000 |
| 2. | Permanent Quadriplegia or Permanent Paraplegia | \$50,000 | \$50,000 |
| 3. | Permanent and incurable total loss of all limbs | \$50,000 | \$50,000 |
| 4. | Permanent Total Loss of sight of both eyes | \$25,000 | \$25,000 |
| 5. | Permanent Total Loss of sight of one eye | \$12,500 | \$12,500 |
| 6. | Permanent Total Loss of the use of two limbs | \$37,500 | \$37,500 |
| 7. | Permanent Total Loss of use of one limb | \$17,500 | \$17,500 |
| 8. | Permanent Total Loss of the lens of two eyes | \$25,000 | \$25,000 |
| 9. | Permanent Total Loss of the lens in one eye | \$12,500 | \$12,500 |
| 10. | Permanent Total Loss of hearing in: a) both ears b) one ear | \$37,500 \$ 7,500 | \$37,500 \$ 7,500 |
| 11. | Third degree burns and/or resultant | | |

| Item | Description | <u>ADULTS</u> | <u>JUNIORS</u> (Under 18) |
|------|--|--|--|
| | disfiguration received from fire or chemical reaction extend to cover more than 40% of the entire body | \$25,000 | \$25,000 |
| 12. | Permanent Total Loss of use of four fingers and thumb or either hand | \$35,000 | \$35,000 |
| 13. | Permanent Total Loss of use of the four fingers of either hand a) both joints b) one joint | \$20,000 \$ 7,000 \$ 3,000 | \$20,000 \$ 7,000 \$ 3,000 |
| 14 | Permanent Total Loss of the use of fingers of either hand a) three joints b) two joints c) one joint | \$ 5,000 \$ 3,500 \$ 2,500 | \$ 5,000 \$ 3,500 \$ 2,500 |
| 15. | Permanent Total Loss of the use of toes of either foot a) all - one foot b) great - both joints c) great - one joint d) other than great, each toe | \$ 7,500 \$ 2,500 \$ 1,500 \$ 500 | \$ 7,500 \$ 2,500 \$ 1,500 \$ 500 |
| 16. | Fractured leg or arm with estimated TOTAL non union | \$ 3,500 | \$ 3,500 |
| 17. | Shortening of a leg by at least 5 cm | \$ 3,500 | \$ 3,500 |
| 18. | 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 benefits as determined at the sole and absolute discretion of the underwriters. Such determination will not be inconsistent with the benefits provided under events 4 - 17 inclusive | | |
| 19. | You becoming totally and permanently disabled as a result of injury sustained while travelling to or from an event in which you are engaged to play for the Insured - 20% of the capital benefit listed above | | |

SECTION 2 - MEDICAL BENEFITS

| | |
|-------------------------------|------------------------------|
| Non Medicare medical benefits | 50% |
| Physiotherapy expenses | 75% |
| Maximum claim | \$1,200 (under this section) |
| Excess | \$20 each and every claim |

SECTION 3 - WEEKLY INJURY BENEFIT

| | |
|--|--------------------------|
| 1) Adult Income Earners | \$210 per week (maximum) |
| Maximum claim period | 52 weeks |
| Excess | 10 days |
| ii) Injury Assistance & Parent Inconvenience benefit | Maximum claim \$1,500 |

SECTION 4 - PUBLIC & PRODUCTS LIABILITY

Covering: The Insured's legal liability to pay compensation to Third Parties in respect of:-

- 1) Personal Injury (including death)
- 2) Property Damage

Arising out of an occurrence and happening during the policy period

Limit of

Indemnity: General Liability - \$10,000,000 each and every claim
Products Liability - \$10,000,000 each and every claim and in the aggregate in any one policy period

SECTION 5 - PROFESSIONAL INDEMNITY

Covering: The Insured's legal liability in respect to claims made by Third Parties in respect to professional negligence arising during the policy period.

Limit of

Indemnity: \$2,000,000

THE COST

| | |
|---|-------------------|
| Players | \$1.95 per player |
| Adults:(Coaches/Umpires/Scorers/Managers/Officials) | \$5.50 per person |

Note: A 10% loading applies for Clubs/Associations that do not have the premium and completed forms to TBAWA by the 16th of November 2010 (this does not apply to Clubs/Associations situated in the North West of W A or who's season runs at a different time to the Metropolitan Clubs/Associations).

HOW TO ENROL

1. Determine the numbers of players and adults requiring cover.
2. Calculate premium using the costs as shown above.
3. Forward cheque (payable to McKenna Hampton Insurance Brokers Pty Ltd) and details of numbers, name of Club and contact name to:-

**TEE-BALL ASSOCIATION OF WESTERN AUSTRALIA
P O BOX 328
JOLIMONT W A 6014**

NOTE: FULL POLICY WORDING IS AVAILABLE ON REQUEST FROM THE OFFICE