

AFL Optional Upgrade Form

2021/2022 Australian Football National Risk Protection Program

For Period: 1st November 2021 to 1st November 2022

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

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 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 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 | 2 | | | | | |
| Club Name | Association League | | | | | |
| 3 | 4 | | | | | |
| Insured Player | Contact Phone Number | | | | | |
| 5 Club Name | State | Post Code | | | | |
| 6 | | 1 000 0000 | | | | |
| - Email Address | | | | | | |
| STEP 2: TOTAL AMOUNT PAYABLE | | | | | | |
| Section B (Non-Football Related Income) Sub | o-total | \$ | | | | |
| Grand Total – Total Amount Payable | | \$ | | | | |
| STEP 3: PLAYER DECLARATION | | | | | | |
| (a) I have read the PDS and agree to be boun Discretionary Trust Arrangement as a Men Membership Contribution in full or in part, or respect of the unexpired portion of the Insu (b) I agree to receive the PDS, FSG and annu https://www.marsh.com/au/services/discret PDS and FSG. I have reviewed those docu FSG. (c) Privacy Act implications: Upon joining the I acknowledge that, as part of the financial r Claims data to all Members and service pro- | nberdoes not entitle the Member to a other than any applicable return Mem urance Cover. al report for this product online at tionary-trusts.html or I have obtained uments including the "Important Infor Discretionary Trust Arrangement, you eports, theTrustee will be declaring N | refund of the Total abership Contributionin a hard copy of the mation" section of the u as a Member, Members' detailed | | | | |
| Name (please print) | | | | | | |
| Sign | Date | | | | | |
| STEP 4: CLUB DECLARATION | | · · | | | | |
| I, the undersigned, declare that I am an author | ised representative of | | | | | |
| | | Name of Club | | | | |
| | | | | | | |
| Authorised Club/League/Association Representative's Name (Please Pr Authorised Club/League/Association Representative's Signature | int) Authorised Club/League/Association R | tepresentative's Title/Position | | | | |
| STEP 5: SUBMIT YOUR UPGRADE FORM | | | | | | |
| Postal Address: Marsh Pty Ltd, GPO B | ox 1229, Melbourne VIC Australia 30 | 000 | | | | |
| Email Address: <u>sport@marsh.com</u> | | | | | | |
| STEP 6: MAKING PAYMENT | | | | | | |
| Marsh will provide you with a Tax Invoice AFT payment options. Payment must be made with If you would like to make payment for upgrade and we will send you a Pay by the Month contr advantage of this offer, please complete, sign a Pay by the Month | in 14 days of receipt of the invoice. d cover via monthly instalments, plea ract for your review. If acceptable and | ase tick the box below d you wish to take | | | | |

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 <u>https://sport.marshadvantage.com.au/afl</u>

Note: AFL Masters / Veterans clubs can only choose the Bronze 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 2021 |

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 2022).

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) | 50% Reimbursement | 75% Reimbursement | 90% Reimbursement | 90% Reimbursement |
| | \$2,000 max. per claim | \$2,500 max. per claim | \$3,500 max. per claim | \$7,500 max. per claim |
| | \$100 excess per claim | \$75 excess per claim | \$50 excess 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) Premium Rates

| Upgrade from | Per Senior / Reserve /Women's Team | Per Junior Team (U19 and below) | | |
|--------------------|---------------------------------------|------------------------------------|--|--|
| Bronze to SILVER | \$318.00 | \$50.99 | | |
| Bronze to GOLD | \$532.00 | \$80.44 | | |
| Bronze to PLATINUM | \$721.00 | \$108.77 | | |
| Silver to GOLD | \$250.00 | \$66.85 | | |
| Silver to PLATINUM | \$439.00 | \$92.91 | | |
| Gold to PLATINUM | \$238.00 | \$65.71 | | |

Non-Medicare Medical Cover Upgrade

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: https://sport.marshadvantage.com.au/afl.

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 | | |
| □ Seniors | | | | | \$ | \$ | | |
| | Number of Teams | | | | Premium rate per team | No. of Teams x Rate | | |
| □ Reserves | | | | | \$ | \$ | | |
| | Number of Teams | | | | Premium rate per team | No. of Teams x Rate | | |
| □ Womens | | | | | \$ | \$ | | |
| | Number of Teams | | | | Premium rate per team | No. of Teams x Rate | | |
| □ Juniors | | | | | \$ | \$ | | |
| (U19 and below) | 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 – 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 2021 |

TABLE (C) Loss of Income Rates for Teams

| Team | Per \$50.00 Cover |
|--------------------------|-------------------|
| Seniors/Reserves/Women's | \$531.00 |
| Juniors (U19 and below) | \$144.00 |

| 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 |
| □ Seniors | \$ | ÷ \$50 = | | × \$531 = | \$ | x | | = | \$ |
| | Weekly Cover | | No. of \$50.00 units | | | | Number of Teams | | Premium payable |
| □ Reserves | \$ | ÷ \$50 = | | × \$531 = | \$ | х | | = | \$ |
| | Weekly Cover | | No. of \$50.00 units | | | | Number of Teams | | Premium payable |
| □ Womens | \$ | ÷ \$50 = | | × \$531 = | \$ | х | | = | \$ |
| | Weekly Cover | | No. of \$50.00 units | | | | Number of Teams | | Premium payable |
| □ Juniors | \$ | ÷ \$50 = | | × \$531 = | \$ | х | | Π | \$ |
| | 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 fulltime, part-time or casual employment) and does NOT include coverage for match payments.

Section C – Loss of Income Cover Purchase - Teams

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 fulltime, 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 | | | | \$91.00 | | | | | |
| Junior Pla | Junior Players (U19 and below) \$34.00 | | | | | | | | |
| | LOSS OF INCOM D INCOME) – RE | | | | IDUAL PLAYERS | 6 (NON-FO | OTBALL | | |
| Grade | Player's Full Name | Date of Birth | Player's O | ccupation | Income Cover | Number Of Units | Sub Total | | |
| Senior | John Smith | 11/07/1975 | Bricklayer | Bricklayer | | Bricklayer | | 10 units | \$910.00 |
| Junior | Joe Bloggs | 07/11/1991 | Apprentice Car | penter | \$300.00 per week | 6 units | \$204.00 | | |
| SECTION | N C TOTAL AMOU | JNT PAYABL | E | | | TOTAL | | | |
| Section | C Total | | | | | \$ | | | |

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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

2022 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 | \$168 |
| Option 2 | \$200 cover per week | \$336 |
| Option 3 | \$300 cover per week | \$504 |
| Option 4 | \$400 cover per week | \$672 |
| Option 5 | \$500 cover per week | \$840 |

STEP 3: LOSS OF INCOME COVER CALCULATION FOR INDIVIDUAL PLAYERS (FOOTBALL INCOME – MATCH PAYMENTS)

| 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 |
|---|-----------------|------------------------|------------------------|------------------------|------------------------|------------------------|
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| SECTION C TOTAL AMO | OUNT PAYABL | Ē | | | TOTAL | |
| Loss of Income Team Pu | rchase (Step 1) | | | | \$ | |
| Loss of Income Individual Purchase – Non Football Related Income (Step 2) | | | | | | |
| Loss of Income Individual Purchase – Football Income (Step 3) | | | | | | |
| Section C Total | | | | | \$ | |

Post:

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Email: sport@marsh.com

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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 advice in this form is general advice only. To help you decide if the cover suits you, please read the Product Disclosure Statement. We can provide you with further information. Please contact us to request. This insurance is arranged by Marsh Advantage Insurance Pty Ltd (ABN 31 081 358 303, AFSL 238 369) ('MAI'). MAI are not the insurer.

The Discretionary Trust Arrangement has been arranged by JLT Group Services Pty Ltd (ABN 26 004 485 214 AFSL 417964) ("JGS"). JGS is a business of Marsh & McLennan Companies (MMC). Cover is subject to the Trustee's discretion and/or the relevant policy terms, conditions and exclusions.

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