



England Netball
Insurance Scheme For Members
2010/11



England Netball governs the number one female sport in England. Affiliated members of England Netball benefit from a centrally arranged Liability and Personal Accident insurance programme.

Log in to the members only area of the website (Individuals' log in) for:

- The Insurance Certificate (details of cover provided)
- Claims forms
- Insurance FAQs
- Details of additional insurance for volunteers and upgrades in levels of cover

This guide has all the information you might need about what and who are covered, key policy exclusions plus forms to help you manage risks and – should you need to – make a claim.

www.EnglandNetball.co.uk - log in to the members only area

www.jltsport.com/en



INTRODUCTION

England Netball (EN) arranges Sports Governance Liability, Sports Disability (Personal Accident) and Public/Products and Employers' Liability insurance for its Affiliated Members. This programme extends to protect players, officials, volunteers, trainers, umpires, coaches and others and is a key Affiliation benefit. This handbook:

- Explains who is covered under this facility
- Identifies the insurance companies underwriting the different aspects of the programme
- Provides a summary of the insurance cover and the key exclusions
- Confirms the claims process
- Makes it clear who you need to contact in the event of a claim or if you have any questions about the scope of the insurance protection
- Contains risk management and personal accident claim forms for you to copy and use

Throughout this document 'Club' refers to an affiliated netball team, (Individuals in Clubs or Young Persons Groups).

Important notes:

This handbook does not provide all the insurance terms and conditions. You should refer to the actual policy documents if you would like full details of the cover and a complete list of terms, conditions and exclusions. A copy of the policy documentation can be obtained by contacting JLT Sport (see page 20 for JLT contact details).

You must remember that all insurance policies require those covered to disclose all information that a prudent insurer would wish to know in deciding whether or not to accept a risk, upon which terms and at what price. Failure to comply with this duty may give the insurer the right to avoid the policy.

Helping you improve player safety:

Risk Management is a process of systematically identifying risks and eliminating or reducing the likelihood and consequences of a risk occurring. Even with the most basic of risk management systems in place, a netball Club will be better equipped to provide a safe environment for all players, officials and volunteers to enjoy the sport of netball. It will also help England Netball and its members to continue to benefit from a comprehensive and competitively-priced insurance programme.

To help us achieve this aim JLT Sport has developed a Pre-Game Checklist. This is designed to highlight issues that can be addressed to reduce the risk of injuries, its proper use should also assist Clubs if somebody seeks to sue them under the Public Liability policy.

The Checklist and Checklist Procedures can be found on pages 10 – 12. We would encourage you to share these documents with your Club members and key match day organisers.

The 2010/11 programme:

The England Netball – JLT Sport relationship continues to thrive, this year bringing members further improved and extended package of insurance cover.



This year we have increased the following Personal Accident benefits to our Gold Level Members:

- A new Broken Bone benefit of £500 for spine, neck and skull.
- An increased Broken Bone benefit for hip and pelvis.

All Silver Level benefits remain as before.



COVER SUMMARIES

keyfacts

1. Public/Products Liability

The insurers:

Primary £10m – Ace European Group Ltd.

Period of insurance

1st September 2010 to 31st August 2011

The Insured (who is covered):

The Insured is the All England Netball Association Limited including all fully-affiliated individuals within Member Clubs, County and Regional Associations, Young Persons' Groups, individuals in groups - Associate members, junior/youth clubs, junior leagues, colleges/universities and armed services netball associations participating in recognised and authorised netball activities.

England Netball's recognised and authorised activities include training, competitions, coaching, course attendance etc. These are governed by EN's current Memorandum and Articles, Regulations, Policies and "Insurance Frequently Asked Questions" document, available in the Member's Logon Area of the website www.englandnetball.co.uk.

What does the policy cover:

The policy will pay for sums that The Insured become legally liable to pay for compensation in respect of damage to third party property or injury or death to third party persons as a result of the administration, organisation and promotion of netball throughout the United Kingdom and all associated activities.

It covers liabilities that can be incurred both on and off the netball court. This will include the following features, although the policy document has full and complete description of the cover:

Participation risk - where a member, temporary player, official or other person registered and actively engaged in sporting and social activities is injured and takes legal action against the Club for personal injury whilst playing. This cover is also extended to include participant-to-participant liability.

Club fundraising and social activities (including bar facilities if owned and/or operated by the Club) – please refer to the Policy Exclusions as certain types of event require prior insurer consent for cover to apply.

Member-to-member cover – where one member takes legal action against another member.

First aid treatment – liability arising from the rendering of first aid treatment (excluding treatment provided by a qualified medical practitioner, such as Doctors or Physiotherapists who should carry their own insurance).

Property owners or occupiers – covering your liability as an owner or tenant.

Products Liability – this relates to products that the Club sells, the most common being food and beverages. If these products are contaminated for example, and a third party takes legal action against the Club as a result, this section of the policy would protect the Club.

Damage to leased property – liability arising from damage to leased or rented premises including fixtures and fittings.



The indemnity limit

Products Liability	£10m any one occurrence and in all any one Period of Insurance
All other claims	£10m any one occurrence
	The Insured pays the first £750 of each and every claim in respect of third party property damage.
	Please note that only one excess will apply where multiple claims can be related to a single cause of loss.

When and where does cover apply?

The policy protects against liabilities any time within the period of insurance and anywhere in the world, although in the event of a claim in USA or Canada, United Kingdom jurisdiction will apply i.e. the claim will be dealt with according to English law.

Some of the main policy exclusions

Dangerous activities/special fund raising events – any event involving hazardous sports, bouncy castles, social events with large crowds or events involving security personnel, child minding, water activities, aircraft, fireworks, livestock, rides of any kind, or any other activity/event you may consider to be “out of the ordinary”, you should contact us prior to commencing the activity so that we can check to ensure that you are insured.



2. Employers' Liability

This insurance is only applicable to Clubs and Associations who have direct employees.

(Please note this insurance only applies to Clubs and Associations who have employees. We strongly recommend contacting England Netball prior to entering into any Employment Contract).

The insurers:

Ace European Group Ltd.

Period of insurance:

1st September 2010 to 31st August 2011.

The Insured (who is covered):

The Insured is the All England Netball Association Limited including all fully-affiliated individuals within Member Clubs, County and Regional Associations, Young Persons' Groups, individuals in groups - associate members, junior/youth clubs, junior leagues, colleges/universities and armed services netball associations participating in recognised and authorised netball activities.

England Netball's recognised and authorised activities include training, competitions, coaching, course attendance etc. These are governed by EN's current Memorandum and Articles, Regulations, Policies and "Insurance Frequently Asked Questions" document, available in the Member's Logon Area of the website www.englandnetball.co.uk.

What does the policy cover:

The policy will pay for sums that The Insured become legally liable to pay for compensation as a result of death, injury or disease occurring to any Employee caused as a result of undertaking the business of The Insured.

The indemnity limit:

£10m any one occurrence.

When and where does cover apply?

The policy protects against liabilities any time within the period of insurance and anywhere in the world, although in the event of a claim in USA or Canada, UK jurisdiction will apply i.e. the claim will be dealt with according to English law.

Some of the main policy exclusions:

Employee Passengers – This policy does not apply to liability for which compulsory motor insurance is required under any road traffic legislation in force within any member country of the European Union.

Employees Offshore – This policy does not apply to any liability to any employee arising while offshore.



3. Sports Disability (Personal Accident)

The insurers:

HCC International Insurance Company plc.

Period of insurance:

Insured Individuals – 1st September 2010 to 31st August 2011, both days inclusive

The Insured (who is covered):

The Insured is the All England Netball Association Limited including all fully-affiliated individuals within Member Clubs, County and Regional Associations, Young Persons' Groups, individuals in groups - associate members, junior/youth clubs, junior leagues, colleges/universities and armed services netball associations participating in recognised and authorised netball activities.

What does the policy cover:

In the event of an Accident causing Bodily Injury to the Insured during The Period of Insurance the policy will pay the following benefits.

Cover	GOLD Insured Individuals (£)	SILVER Insured Individuals (£)
Accidental Death	£5,000	£5,000
Permanent Total Disablement	£50,000	£10,000
Loss of Limb	£50,000	£10,000
Loss of Sight	£50,000	£10,000
Loss of Speech	£50,000	£10,000
Loss of Hearing	£50,000	£10,000
Emergency Dental Expense	Up to £600 (£50 excess)	Up to £250 (£50 excess)
Hospitalisation Confinement of 24 hours or more 25 day period; max £750 any one accident	£50 per day (full 24 hour period)	NIL
Convalescence: Period following hospitalisation for at least 7 days	£100	NIL
Physiotherapy	Up to £250 (£60 excess)	None
Broken Bones Max £500 any one accident	Spine/Neck/Skull £500 Arm £100 Hip/Pelvis/Leg £200 Elbow/Wrist/Ankle £50 Other £20	Arm £50 Leg £100
Temporary Total Disablement Compensation Benefit (weekly) No cover for the first 14 days	£200 Max £500 each and every loss	NIL



Insured(s) C Premier League Umpires

Benefits:	Premier League Umpires	Super League Umpires
Accidental Death	GBP 10,000	GBP 20,000
Permanent Total Disablement	GBP 100,000	GBP 200,000
Loss of Limb	GBP 100,000	GBP 200,000
Loss of Sight	GBP 100,000	GBP 200,000
Loss of Speech	GBP 100,000	GBP 200,000
Loss of Hearing	GBP 100,000	GBP 200,000
Emergency Dental Expenses, subject to an excess of £50 each & every loss	Up to GBP 1,200	Up to GBP 2,400
Hospitalisation: 25 day benefit period; max £750 any one accident	GBP 100 per day (full 24 hour period)	GBP 200 per day (full 24 hour period)
Convalescence: Period following hospitalisation for at least 7 days	GBP 200	GBP 400
Physiotherapy treatment following a ruptured/snapped/torn ligament or tendon subject to an excess of £60 each & every loss, and in excess of all other valid collectibles	Up to GBP 500	Up to GBP 1000
Broken Bones Max £500 any one accident	Spine/Neck/Skull GBP 1000 Hip/Pelvis/Leg GBP 400 Arm GBP 200 Elbow/Wrist/Ankle GBP 100 Other GBP 40	Spine/Neck/Skull GBP 2000 Hip/Pelvis/Leg GBP 800 Arm GBP 400 Elbow/Wrist/Ankle GBP 200 Other GBP 80
Temporary Total Disablement Compensation Benefit (weekly)	GBP 400 per week Subject to a 14 day excess period and a limit of GBP 1000 each & every loss	GBP 800 per week Subject to a 14 day excess period and a limit of GBP 2000 each & every loss



When does cover apply:

Cover applies whilst The Insured is involved in recognised and authorised netball activities (such as training, practice or games) within the United Kingdom.

Key policy definitions:

For a full and complete list refer to the policy document:

Accident – a single, sudden and unexpected event that happens by chance and which could not be expected, which occurs at an identifiable time and place which directly and independently causes Bodily Injury .

Bodily injury – an injury to The Insured which is caused only by an Accident; and on its own leads to Death; Loss of Limb; Loss of Sight; Loss of Speech; Loss of Hearing; Permanent Total Disablement; Emergency Dental Expenses; Hospital Confinement; Convalescence or Broken Bones within 12 months of the Accident.

Broken bones – a complete fracture of one or more of all bones.

Convalescence – the period following The Insured's hospital confinement for at least seven days provided they are under the regular care and advice of a Qualified Medical Practitioner and are unable to carry out all parts of their normal occupation.

Physiotherapy – the expenses from treatment by a Chartered Physiotherapist for bodily injury incurred by the Insured individual, but is limited to the treatment of either fractures or ruptures to a ligament or tendon of the Insured individual.

Loss of hearing – total and irrecoverable deafness confirmed by audiometer and sound threshold tests.

Loss of limb – loss of an arm, physical severance of the four fingers at or above the metacarpal phalangeal joints (where the fingers join the palm of the hand) or the permanent total loss of use of an entire hand or arm and/or amputation of or losing the use of a leg at or above the ankle (talo-tibial joint).

Loss of sight – permanent blindness in both eyes resulting in the Insured Person's name being added to the Register of Blind Persons on the authority of a qualified ophthalmic specialist or permanent blindness in one eye to the degree that, after correction using spectacles, lenses or surgery, objects that should be clear from 60 feet away can only be seen from 3 feet away or less.

Loss of speech – total and permanent loss of speech.

Permanent disablement – disability lasting at least 12 months and from which the Insurers believe The Insured will never recover.

Total disablement – a Permanent Disability, caused other than by Loss of Limb, Loss of Sight in One/Both Eyes, Loss of Speech or Loss of Hearing which stops the Insured from carrying out gainful employment of any and every kind.

Temporary total disablement compensation – the amount payable for loss of wages due to Total Disablement after the Excess Period has been satisfied. The compensation amount will be payable, based upon your proven weekly taxable income, up to the amount shown in the schedule. Proven income does not include overtime payments, bonuses or other allowances.



Main policy exclusions:

Insurers will not pay any benefit for Bodily Injury after the expiry of the Period of Insurance during which The Insured attains the age of seventy five years.

Professional sports persons or professional entertainers, with the exception of full time paid coaches.

Sickness, or disease, that is not caused by Bodily Injury.

Disabilities arising from

- Repetitive Stress (Strain) Injury or Syndrome or any gradually operating cause
- Post Traumatic Stress Disorder or any psychological or psychiatric condition

Suicide, attempted suicide or deliberate self-inflicted injury by the Policyholder regardless of the state of their mental health.

Pregnancy, childbirth, miscarriage or any consequence thereof.

The influence of solvents, drugs or medication upon the Policyholder, except where it can be proved that the drugs or medication were taken in accordance with a proper medical prescription and not for the treatment of drug addiction.

The Policyholder driving a motor vehicle while the alcohol content of their blood exceeds the level permitted by the law of the country in which the Accident occurs.

Pre-existing medical conditions.

4. Sports Governance

The insurers:

£5m – Hiscox Insurance Company Ltd

Period of insurance:

1st September 2010 to 31st August 2011

The Insured (who is covered):

Applies to affiliated Associations and Clubs employing staff. (Please note this insurance only applies to Clubs and Associations who have employees. We strongly recommend contacting England Netball prior to entering into any Employment Contract).

England Netball's recognised and authorised activities include training, competitions, officiating, coaching, etc. These are governed by EN's current Memorandum and Articles, Regulations, Policies and "Insurance Frequently Asked Questions" document, available in the Member's Logon Area of the website www.englandnetball.co.uk.

What does the policy cover:

The Sports Governance policy taken out by England Netball is designed to protect the sport and its members from the legal liability associated with governance.



Trustees and Individual Liability

Coverage extends to indemnify the insured against any claim first made against the insured in respect any actual or alleged error, misstatement, wrongful act, omission neglect, misleading statement, breach of duty, breach of trust, breach of contract, breach of warranty of authority, wrongful trading, or other act allegedly committed in the capacity of a Director or Officer of the Association.

Professional and Legal Liability

This coverage extends to provide cover in respect of negligent act, negligent error or negligent omission. This includes advice given by coaches, umpires, officials, managers and trainers.

Employment Practices Liability

In respect of Employment Practices Liability coverage extends to any claim made against the Insured in respect of any wrongful act which arises out of employment issues.

Section	Cover
Trustees and Individual	£5,000,000
Employment Practices Liability (excluding USA/Canada)	£1,000,000
Professional and Legal Liability	£5,000,000
Civil Fines / Penalties	£1,000,000
Judicial Review	£100,000
Pollution	£100,000
Court Attendance Costs	£150,000

When does cover apply:
Anywhere in the world.

What are the major exclusions under this policy?

- Deliberate or dishonest acts.
- Prior claims, investigations and circumstances.
- Bodily injury or property damage.
- Failure to provide medical services.



MANAGING RISK AND POTENTIAL CLAIMS

Pre-Game Checklist procedures:

We recommend that you complete the following Pre-Game Checklist before any social or local game (where an umpire or competition official has not been required to complete a risk assessment) and that it should become part of the overall risk management culture of your Club. The main aim is to create awareness of situations that may contribute to an injury and rectify them where possible. JLT Sport have proven in other parts of the world that their completion ultimately helps to reduce the risk of injury to participants, spectators, organisers and the general public.

Who should complete them?

All Clubs competing should take part in the completion of the checklist. The form asks for a home team representative and an away team representative to sign the form once they are satisfied with the conditions.

If the Club is responsible for proceedings on game day (i.e. shared common ground), then a Club representative may take responsibility for the completion of the form. However, the participating Clubs should still review the questions and sign the form to ensure that they are satisfied with the conditions prior to the commencement of play.

All Clubs should choose a suitable person that will be responsible for this activity (and a back up if he/she is not available).

When should they complete them?

The checklist should be completed prior to the commencement of play of the first game on game day.

What if the conditions change after completion?

If the conditions change during a game or at another time during the day the checklist process should be revisited. The earlier completion of the form should not result in play continuing even where it is acknowledged that it is potentially unsafe. However, the full extent of the checklist process would probably not be required.

In the event that the conditions do change significantly enough for this to be revisited, the situation should either be rectified (e.g. glass removed) or the competing Clubs should meet to decide whether conditions are too dangerous to continue with play (e.g. extreme storm conditions). Ultimately, the responsibility for these situations will rest with the Clubs. But the safety of the players, spectators etc should be the over riding factor.

Will I be held responsible if I sign the form?

The intention of the checklist is not to hold Club officials responsible should someone get injured. It is simply a form that facilitates a discussion between the Clubs/officials about the overall state of the playing condition. By signing the form there is a sense of formalising the process.

However, insurance cover does protect Clubs and officials in the case of wrongful acts or errors, although they still have a duty of care to provide safe conditions for participants. Cover will not exist for officials who show wilful negligence or disregard for these responsibilities.

What happens to the checklist once it has been completed?

The home Club should retain the original checklist. These forms should be retained for a minimum of 3 years for future reference.

What if one Club declines to sign the form?

If one Club declines to sign the form due to dissatisfaction of playing conditions, the risk should be identified and rectified to a standard that provides acceptable safe conditions for all parties. Once both Clubs are satisfied, the form should be able to be signed and play commenced.

If conditions prove too unsatisfactory and are unable to be rectified, common sense should prevail. Play should never commence until safe conditions are available to all participants.



ACCIDENTS

In the event of an accident, ensure that:

- The first-aider is called immediately to administer to anyone with an injury
- The Accident Report form is completed and filed for future reference

OTHER IMPORTANT CONSIDERATIONS

- Use only affiliated umpires, coaches, officials, etc who are appropriately qualified, or your own team's insurance may be affected
- Participate only with other affiliated teams, or your own team's insurance may be affected

Please refer to our website www.englandnetball.co.uk for the current "Frequently Asked Questions" which outlines EN rules and policies.

PRE-GAME CHECKLIST

England Netball, 9 Paynes Park, Hitchin, Herts SG5 1EH www.Englandnetball.co.uk
T: +44 (0)1462 442344 F: +44 (0)1462 442343 E: info@Englandnetball.co.uk



We recommend that you complete this form before any social or local game (where an umpire or competition official has not been required to complete a risk assessment). Once completed, it should be filed with the Home team for future reference.

Date _____

Home Club/Team _____ Club Netball Id: _____

Away Club/Team _____ Club Netball Id: _____

Venue _____

COURT SURFACE & SURROUNDS

ACCEPTABLE UNACCEPTABLE

- | | | |
|---|--------------------------|--------------------------|
| Is the court surface free of debris? | <input type="checkbox"/> | <input type="checkbox"/> |
| Is the court surface in reasonable condition? (free of holes, cracks, etc) | <input type="checkbox"/> | <input type="checkbox"/> |
| Is the perimeter surrounding the court safe?
(free of obstructions, hanging signs, loose balls, etc) | <input type="checkbox"/> | <input type="checkbox"/> |
| Are the goal posts in good condition? (no obvious damage) | <input type="checkbox"/> | <input type="checkbox"/> |
| Is there an adequate run-off area around each court? | <input type="checkbox"/> | <input type="checkbox"/> |
| Is the lighting sufficient to ensure safe play? | <input type="checkbox"/> | <input type="checkbox"/> |

WEATHER

- | | | |
|---|--------------------------|--------------------------|
| Have weather conditions or water made the surface unsafe for play? | <input type="checkbox"/> | <input type="checkbox"/> |
| Are the weather conditions safe for play to commence (extreme heat, lightning, etc) | <input type="checkbox"/> | <input type="checkbox"/> |

FIRST AID & FIRE SAFETY

- | | | |
|---|--------------------------|--------------------------|
| Is a trained first aider/first aid kit and ice available for treating injured players? | <input type="checkbox"/> | <input type="checkbox"/> |
| Is an adequate procedure in place for dealing with a serious injury
(mobile phone, transport, etc) | <input type="checkbox"/> | <input type="checkbox"/> |
| Have the fire exits been checked (if applicable)? (clearly defined, free of obstruction) | <input type="checkbox"/> | <input type="checkbox"/> |
| Are there any other factors which may be dangerous to the players? | <input type="checkbox"/> | <input type="checkbox"/> |
| Have all participants been made aware of the drill in event of a fire or other emergency? | <input type="checkbox"/> | <input type="checkbox"/> |

COMMENTS (particularly where any "not acceptable" checkboxes have been ticked)

Prior to the commencement of play, we, the undersigned, have undertaken the above inspection and agree that the playing environment is fit for play.

Home Club/Team Representative Name

Away Club/Team Representative Name

Signature

Signature

A copy of this form must be filed and kept by the HOME Club/Team for each match conducted and be kept for seven (7) years. The form must be able to be provided to Netball County Association/JLT Sport on request if required.



HOW TO MAKE A CLAIM

Sports Disability (Personal Accident)

The claim should be reported to England Netball Affiliations Department. This can be done in one of two ways:

1. Download – go to the Members Login Area of the EN website, www.EnglandNetball.co.uk and download a claim form. This should be completed and sent to EN Affiliations Department along with supporting documentation (see below).
2. Phone 01462 442344. They will send you a claims form for you to complete and return with supporting documentation (see below).

Supporting documentation

You will need to provide the following information with your claim form:

- Match report or accident report detailing the accident causing bodily injury
- Relevant medical records, including doctors/consultants notes advising of details of the disability

All other types of loss

It is essential that you notify JLT Sport (0845 3372446) immediately of any claim or potential claim. It is also important not to admit liability or discuss the matter with a third party. JLT Sport staff will guide you through the claims process.

This form should be completed for all incidents whether or not medical treatment is given, and filed for future reference.



England Netball, 9 Paynes Park, Hitchin, Herts SG5 1EH www.Englandnetball.co.uk
T: +44 (0)1462 442344 F: +44 (0)1462 442343 E: info@Englandnetball.co.uk

ACCIDENT REPORT FORM

1. DETAILS OF PERSON INVOLVED

NAME: _____ NETBALL ID _____

FULL ADDRESS: _____

POSTCODE: _____

DATE OF BIRTH _____ OCCUPATION _____

TELEPHONE(S) _____

FULL DETAILS OF INJURIES _____

TREATMENT RECEIVED _____

2. ACCIDENT/INCIDENT

EVENT & VENUE _____

LOCATION WITHIN VENUE _____

DATE _____ TIME _____

DESCRIPTION OF INCIDENT _____

To support your description, you may wish to complete a diagram on a separate piece of paper.

3. DETAILS OF PROPERTY DAMAGE if applicable

PROPERTY OWNER'S NAME: _____

FULL ADDRESS: _____

_____ POSTCODE: _____

TELEPHONE(S) _____

DETAILS OF DAMAGE _____

4. WITNESSES if available

NAME: _____

FULL ADDRESS: _____

_____ POSTCODE: _____

TELEPHONE(S) _____

NAME: _____

FULL ADDRESS: _____

_____ POSTCODE: _____

TELEPHONE(S) _____

NAME: _____

FULL ADDRESS: _____

_____ POSTCODE: _____

TELEPHONE(S) _____

5. ANY ADDITIONAL COMMENTS

Signature _____ Date _____

Name _____ Your Netball Role at this Event _____

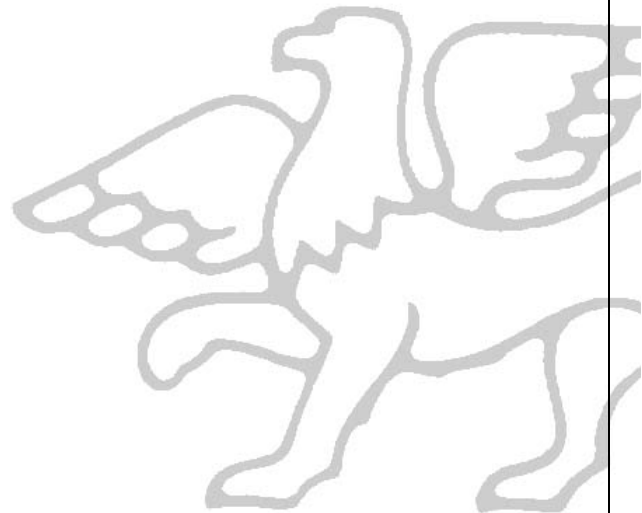


Claim Form

All England Netball Association Limited

Personal Accident

Policy Number - B0901L61008342000





Important Notice

Please ensure that each question is answered fully and accurately

**Checklist
(please tick)**

- Section 1A and 1B – to be completed by the individual submitting the claim
- Section 2 – to be completed by a qualified and registered medical practitioner (at the claimant's own expense)
- Please ensure that Section 1 is **signed** by the individual making the claim, **and** Section 2 is signed by the registered medical practitioner

Once both sections have been fully completed please return the form to

**Affiliations Dept
England Netball
9 Paynes Park
Hitchin
Herts SG5 1EH
T: +44 (0)1462 442344
F: +44 (0)1462 442343
E: affiliations@englandnetball.co.uk**

A copy of this claim form should be retained by you for your records

The following questions relate to the person submitting the claim

If there is insufficient space to answer questions, please use an additional sheet and attach it to this form (please indicate section number)

Name of Insured Individual: _____	Affiliation Number: _____
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Address: _____ _____ _____	Date of Birth: _____
Telephone: _____	Occupation: _____
Club ID/Name: _____	E-Mail address: _____
Weekly Income: _____	



Section 1A

Claim Accident Background (to be completed by the claimant)

1. Please state Location, Date and Time of Accident and attach the umpired match report recording the accident

Location / Event:		
Date:		Time:

2. In what capacity were you playing Netball:
(please tick relevant box and provide qualification if applicable).

Player	<input type="checkbox"/>		
Coach	<input type="checkbox"/>	Qualification:	<input type="text"/>
Umpire	<input type="checkbox"/>	Qualification:	<input type="text"/>

3. Please give a full description of the accident and circumstances surrounding it (please complete on a separate sheet if necessary)

4. Please state, as precisely as you can, the injuries you have sustained

5. Did you receive any 'on field' treatment / diagnosis at the event?
If Yes, please give full details

Yes / No



Yes / No

6. Were you hospitalised as a result of this accident?
If Yes, please provide name of hospital, date and time of your admission and a copy of your hospital discharge form.

Yes / No

7. Have you any previous history of an injury similar to that now sustained?
If Yes, please give full details (on a separate sheet if necessary)

Yes / No

8. As a result of this accident, have you been unable to attend to any part of your occupation?

If the answer is 'Yes; (I) Are you still so incapacitated and (II) between which dates have you been incapacitated

(I)

Details:

(II)

Yes / No

9. Are you claiming under any other policy in respect of this accident?
If yes, please give full details

Section 1B

Information concerning the duration of your Accident (to be completed by the claimant)

10. Period of Temporary Total Disablement?



11. Give date that normal occupation was resumed?

12. Are you receiving any ongoing physiotherapy treatment as a result of this accident?
If Yes, please provide full details

13. Has any Permanent Disablement resulted?
If yes, please give full details

Declaration (to be made by the claimant)

Important

I hereby authorise any hospital, physician or other person who has attended or examined me, to furnish the company or its authorised representative all information with respect to any illness or injury, medical history, consultation, prescriptions or treatment and copies of all hospital records.

I also agree to be medically examined by an authorised representative of my insurers, if required by them. A Photostat copy of this authorisation shall be considered as effective and valid as the original.

I/ We declare that the above particulars are true in every respect.

Claimant's
Signature:

Print Name:

Dated:



Section 2

Medical Certificate (to be completed by a registered medical practitioner)

Name of Doctor:	Name of Claimant:
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Practice Address:	

Telephone: _____	E-Mail address: _____

1. When did you first attend upon the claimant in consequence of the injuries/illness sustained?

Location / Event:	Date:
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2. Are you still in attendance?

Yes / No

3. Are you the usual medical attendant of this patient?
If Yes, how long have you known him / her

Yes / No

years

4. What was the cause of the accident so far as known?

--

5. What injuries were sustained?

i)	Region injured (if a hand, arm, foot, or leg, state whether right or left)
ii)	Outline the nature and extent of injuries

6. Are the symptoms from which he/she suffers due to:

i)	The accident alone, or
ii)	Are they attributable to any other cause



7. Is the patient now, or was he/she at the time of the accident / illness subject to or suffering from any illness or disease irrespective of the accident for which the benefit is claimed?

If Yes, please state the nature of same, and to what extent the recovery of the patient may be Affected thereby.

Yes / No

8. If you are the usual medical attendant of the patient, are you aware of anything in his/her previous medical history which might have contributed directly or indirectly to the occurrence of the accident or which may be likely to retard in any way recovery from it?

9. Are you prepared to certify that the patient is totally disabled from attending to any portion of his/her occupation?

10. For what period has the claimant been totally disabled from any part of his/her occupation?

Declaration (to be made by the medical practitioner)

- a) I warrant that that this form and questionnaire has been completed to the best of my knowledge and belief that all statements and particulars provided by me are true and complete.
- b) I have NOT misstated, omitted, or suppressed any material fact or information (a material fact is one which is likely to influence an Underwriter's assessment and acceptance of a claim. If you are in any doubt as to whether a fact is material or not you are advised that it is in your own interest to disclose all facts).
- c) If there is any material alteration to the facts or information which I have provided or any new material matter arises, I undertake to inform Insurers.

Doctor's
Signature:

Print Name:

Dated:

Address:



KEY CONTACTS

Should you have a claim query:



www.Englandnetball.co.uk - log in to the members only area of the website for details of cover, claim forms, FAQs etc. Otherwise for personal Accident Claims please contact England Netball:

Telephone Number:	(01462) 442344 (ask for affiliations)
Fax Number:	(01462) 442343
Address:	EN Affiliations Dept, 9 Paynes Park, Hitchin, Hertfordshire, SG5 1EH

Contacts:

Sam Castle, Membership Manager	Email: samc@Englandnetball.co.uk
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All other claims/general enquiries please contact JLT Sport:

Telephone Number:	0845 337 2446
Fax Number:	020 7582 4500
Address:	JLT Sport, 6 Crutched Friars, London EC3N 2PH

Contacts:

Tara Strydom	Email: Englandnetball@jltgroup.com
Richard Rainbow, Partner	Email: Englandnetball@jltgroup.com
Duncan Fraser, Partner	Email: Englandnetball@jltgroup.com



ABOUT JLT SPORT

JLT Sport is the global sports and events practice of JLT Specialty Limited.

We provide tailored insurance broking, risk management and project consulting services to:

- Professional sport – from Associations to Clubs
- Amateur Sports Associations: from insuring players to revenue generation
- Major sports event organiser
- Major entertainment event organisers

Details of our services, the solutions we provide and our management team can be found at www.jltsport.com.

Although big enough to complete the largest and most complex transactions, we are agile enough to give every client, every project and every relationship senior level attention. Our people have the knowledge, resources and reach to identify the right solutions and, as importantly, deliver them.

JLT is an international group of risk specialists and employee benefits consultants and one of the largest companies of its type in the world. We offer a distinctive choice to our clients and partners through our combination of independence, scale and specialism.

As an independent business, we are able to operate with autonomy and flexibility. We have the scale to provide solutions to the complex demands of the world's leading companies and to deliver global servicing whilst recognising that the needs of each of our clients are unique.

By developing highly specialised services, we provide our clients with a depth of expertise and experience. The value we create is driven through the personal determination of our 6,200 highly motivated and skilled people.



FSA COMPLAINTS PROCEDURE

If you have a complaint regarding our practices or performance which you are unable to resolve to your satisfaction with the Partner(s) and/or Associate(s) we have assigned to manage your account, please contact:

The Head of Business Risk and Regulatory Compliance
JLT Specialty Limited
6 Crutched Friars
London EC3N 2PH
United Kingdom

detailing the nature and underlying circumstances of your complaint.

The Compliance Department, which is responsible for monitoring the quality of our services and compliance with the laws and regulatory rules applied to us in the UK, will investigate the matter fully, respond to you in detail and, where it considers the complaint reasonable, endeavour to ensure that necessary actions are taken to resolve your complaint.

Alternatively, or if your complaint remains unresolved following the review and response by our Compliance Department, you can request from us details of regulatory bodies, ombudsman, or other independent dispute remediation bodies to whom complaints can be forwarded directly.

Making a complaint against us is in addition to and does not replace your right to seek legal redress against us.

In addition to the above we would welcome any comments that you have with regard to our service. Our customer feedback form can be found on our website at www.jltgroup.com

ENGLAND NETBALL

INSURANCE CERTIFICATE FOR

PERSONAL ACCIDENT, LIABILITY AND SPORT GOVERNANCE INSURANCE

By virtue of your membership to England Netball, you are eligible for the following insurances, provided through our insurance brokers, JLT Specialty Limited. The policies are valid for 12 months from the 1st September 2010.

Insured Activities For fully-affiliated members of England Netball (Member clubs, Associations and Individuals, and associated groups that have paid the additional insurance fee), cover is provided in respect of any activity recognised and authorised by England Netball.

Policy Type: Personal Accident
Policy Number: HCCSUAENA2010JCATTD
Insurer: HCC International Insurance Company plc

The Insurer will, subject to the terms, conditions, provisions and exceptions of this policy, pay the Insured the relevant benefit(s) if, during the period of Insurance, an Insured Person sustains accidental bodily injury resulting, directly and independently of any other cause within two years, in death loss or disablement as defined under the policy.

Operative time is anywhere in the world (for insured activities) including direct travel to and from an activity within the United Kingdom.

Benefits	Gold (Individuals in Clubs and Young Persons Groups)	Silver (Individuals in Groups - Associate Youth/Junior clubs, Junior League, College/Universities and Armed Services Netball Association)
Accidental Death	GBP 5,000	GBP 5,000
Permanent Total Disablement	GBP 50,000	GBP 10,000
Loss of Limb	GBP 50,000	GBP 10,000
Loss of Sight	GBP 50,000	GBP 10,000
Loss of Speech	GBP 50,000	GBP 10,000
Loss of Hearing	GBP 50,000	GBP 10,000
Emergency Dental Expenses subject to an excess of £50 each & every loss	Up to GBP 600	Up to GBP 250
Hospitalisation: 25 day benefit period; max £750 any one accident	GBP 50 per day	NIL
Convalescence: Period following 7 days hospitalisation	GBP 100	NIL
Physiotherapy treatment following a ruptured/ snapped/ torn ligament or tendon subject to an excess of £60 each & every loss, and in excess of all other valid and collectibles	Up to GBP 250	N/A
Broken Bones: Spine/Neck/Skull max £500 any one accident	Spine/Neck/Skull GBP 500 Hip/Pelvis/Leg GBP 200 Arm GBP 100 Elbow/Wrist/Ankle GBP 50 Other GBP 20	Arm GBP 50 Leg GBP 100
Temporary Total Disablement Compensation Benefit (weekly)	GBP 200 subject to a 14 day excess period and a limit of £500 each & every loss	NIL

Policy Type: Public/Products Liability
Policy Number: UKCASC27198
Insurer: ACE European Group Ltd

This covers legal liability for damagers and legal costs arising out of Third Party loss, injury or damage, in connection with the activities described above and notified to the Insurers within the period of Insurance. Cover includes Public Liability, liability for damage to leased and rented premises, member to member liability, indemnity to principals and liability arising out of goods sold supplied including refreshments.

Operative Time is anywhere in the world (for insured activities)

Limit of Indemnity: £10,000,000 any one event (in the aggregate in respect of Products)

Policy Type: Sports Governance
Policy Number: HUP161604706
Insurer: Hiscox Insurance Company Ltd

The insurer subject to the terms, conditions, exclusions and limitations in the policy agree to indemnify the insured and or/the Association in accordance with the following insuring clauses:

- a) Professional Indemnity £5,000,000
- b) Directors and Officers £5,000,000
- c) Employment Practices £1,000,000

THIS CERTIFICATE DOES NOT CONTAIN THE FULL TERMS AND CONDITIONS OF THE INSURANCE CONTRACT

The summaries of cover in this certificate should be read in conjunction with the Schedule of Policy Wording, and with EN's current Memorandum and Articles, Regulations, Policies and "Insurance Frequently Asked Questions" documents, available in the Members Login Area of the website www.Englandnetball.co.uk Copies of the insurance policy wordings are available upon request from:

JLT Sport, 6 Crutched Friars, London, EC3N 2 PH

If you have any queries regarding these covers or reason to make a complaint, please contact, JLT Sport.
If you are still not happy with our services you may have the right to ask the Financial Ombudsman Service to review your case.



PUBLIC LIABILITY CLAIMS NOTIFICATION GUIDELINES

This notification sheet tells you when you should report an incident/accident to England Netball, Affiliation Department.

It is important that all incidents that may give rise to a claim are reported to us as soon as possible after the event. This will enable Insurers to carry out investigations at an early stage while information relating to the claim remains fresh in the mind. This will also ensure that you are complying fully with your policy terms and conditions.

In order to achieve this, we would ask that you notify us immediately of any incident that involves:-

- A fatal accident
- An injury involving either referral to or actual hospital treatment
- Any allegations of libel/slander
- Any allegations of Professional Negligence i.e. arising out of tuition, coaching or advice given
- Any investigation under any child protection legislation
- Any circumstances involving damage to third party property

AN INJURY IS DEFINED AS:-

- Any head injury that requires medical treatment (doctor/hospital)
- Any fracture other than to fingers, thumbs or toes
- Any amputation, dislocation of the shoulder, hip knee or spine
- Loss of sight (whether temporary or permanent)
- Any injury resulting from electrical shock or burn, leading to unconsciousness or requiring resuscitation or admittance to hospital for more than 24 hours
- Any other injury
- Loss of consciousness caused by asphyxia or by exposure to harmful substance or biological agent

Please note the above list is not exhaustive and if you are unsure as to whether an incident should be reported, then please do not hesitate to contact JLT Sport for further advice.

We would remind you that in NO circumstances should you admit liability or agree to pay for any damage caused as this may prejudice the position of Insurers and COULD result in the withdrawal of any indemnity.

Finally, please note that this is a liability policy where insurers decide if negligence attaches to you. Therefore any payments you make to any third parties will not necessarily be re-imbursed.

INCIDENTS RECORDING GUIDELINES

We would recommend that a designated person within your organisation is made responsible to record any reportable accident. Records must be kept for at least 3 years. Names and addresses of any possible witnesses should also be recorded.

From 31st December 2003 it is a requirement to use a new style accident book that is compliant with data protection legislation. It is available from HSE books. It also contains information of first aid and guidance on how to prevent accidents occurring in the first place.

The register must contain the following information relating to all reportable accidents or dangerous occurrences:

- Date and time of accident
- As regards a person at work-full name, occupations, nature of injury and age
- As regards a person not at work - Full name, status (e.g. customer) nature of injury, age
- Place where accident occurred
- A brief description of the circumstances
- Method by which the event was reported.

JLT Sport, 6 Crutched Friars, London, EC3N 2PH Tel: 0845 337 2446



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