



Members Insurance

These notes have been produced to give active financial active members a summary of the various cover automatically provided as a benefit of their membership to the Show Horse Council of Australasia Inc.



This summary does not necessarily incorporate all the terms and conditions of the policies.

The Master Policies and Product Disclosure Statements are held at the Council's Office are available for further reference and take precedent over anything contained in these notes. On request, Show Horse Council will provide you with a complementary copy of the Master Policy.

Cover has been structured based on the Council's activities, risk management procedures, rules and regulations and anyone acting outside these guidelines may prejudice their entitlement under the policies and be left uninsured.

Cover under this policy is not available to inactive members, day members or visiting instructors.

The cover afforded under the Master Policies commences on 31 July 2017 and terminates on 31 July 2018. Where insurance cover will not apply for this period, or is (or is likely to be) cancelled or not renewed, Show Horse Council undertakes to notify you of these occurrences by announcement on the webpage and/or newsletters. You may, at any time, check the currency of this Policy by contacting our broker, Aon Risk Services Limited ABN 17 000 434 720 AFSL 241141 on 1800 806 493.

PERSONAL LIABILITY INSURANCE - MEMBERS

This policy covers you in respect of Personal Liability twenty-four (24) hours a day, seven (7) days a week whilst involved in recreational non income-earning equestrian activities.

It covers you should you be held liable for causing bodily injury or property damage to a third party, including whilst attending or participating in Show Horse sanctioned and/or authorised Show Horse activities involving Show Horse disciplines.

If an incident were to occur you may feel morally liable, but this does not necessarily mean that, in a Court of Law, you would be legally liable. It is therefore essential that all incidents that could give rise to a claim are reported as soon as possible.

Where an active Member is involved in income earning, commercial or business related activities, separate or additional coverage may be required.

Amount of Cover

General Liability

- \$20,000,000
- In respect of any one occurrence or series of occurrences arising out of one event

Excess

- \$2,500
- Each and every claim, payable by the Member, Constituent or club against whom the claim is made

Cover is provided to a Member when they are:

- Attending and/or participating in sanctioned and/or authorised Show Horse activities
- Attending and/or participating in approved affiliated club activities
- Training or practicing for Show Horse competitions anywhere in Australia
- Agisting their horse at a third parties premise
- Exhibitions and performances
- Temporary or Overseas Visits
- Pleasure Riding



Cover is not provided to a member for:

- ✗ Damage to property owned by the Member.
- ✗ Claims arising out of the ownership and/or use of mechanical bulls and/or mechanical horses.
- ✗ Where cover is provided by the Members home insurance policy or similar.
- ✗ Claims arising out of the members ownership or lease of property or vacant land.
- ✗ Cover does not apply where the Member is required to effect a separate cover.
- ✗ Cover does not apply where the Member is requested to contribute to another insurance program.
- ✗ Claims if their membership is not financial at the time of loss
- ✗ Cover does not apply to day or temporary participants (refer to Club Insurance).



PERSONAL ACCIDENT - MEMBERS

This policy provides cover for Adult and Junior active financial members of the Show Horse Council of Australasia Inc for personal injuries sustained whilst engaged in recreational non-income deriving equestrian activities twenty-four (24) hours a day, seven (7) days a week.

A registered Adult Member is aged between 17 and 80 years of age.

A registered Junior Member is aged between 3 years and under 17 years of age.

Cover under this policy is not available to non-members, day or other temporary participants.

Members are covered at all times whilst involved in recreational non-income earning equestrian related activities including:

- Practicing anywhere
- Training Days
- Schools or clinics
- Sporting competitions
- Whilst preparing horse for competition at home
- Lunging
- Pleasure Riding

Cover is **NOT** provided when you are:

- ✗ Traveling to and from such activities
- ✗ Being paid to ride
- ✗ Earning an income from the activity

Amount of Cover - Adults

Death & Capital Benefits	<ul style="list-style-type: none"> • Income Earning Members • Up to a maximum of \$60,000
Weekly Benefits - Injury	<ul style="list-style-type: none"> • Non-Income Earning Members • Up to a maximum of \$60,000
Weekly Benefits - Injury	<ul style="list-style-type: none"> • Income Earning Members • 85% of earnings up to \$500 per week payable up to 104 weeks from the date of injury unless otherwise stated with a 14 day excess
Weekly Benefits - Injury	<ul style="list-style-type: none"> • Non-Income Earning Members • Benefit not available to non-income earners. Other Benefits applicable as shown



Amount of Cover - Juniors

Death & Capital Benefits	<ul style="list-style-type: none">• Income Earning Members• Up to a maximum of \$15,000
	<ul style="list-style-type: none">• Non-Income Earning Members• Up to a maximum of \$15,000
Weekly Benefits - Injury	<ul style="list-style-type: none">• Benefit not available to Juniors. Other benefits applicable as shown

Additional Benefits - Applicable to Adult & Junior Members

Non Medicare Medical Expenses

If a registered active Member suffers from an injury we will pay 100% of the Non-Medicare Medical Expenses limit shown below.

Expenses must be incurred within twelve (12) months of sustaining an injury and paid to a legally qualified practitioner, nurse, hospital or ambulance service for treatments relating to Medical, Surgical, X-ray, Chiropractic, Osteopathic, Physiotherapy, Hospitalisation, Nursing

Non-Medicare Medical Expenses	<ul style="list-style-type: none">• \$5,000 maximum• \$50 excess each and every claim
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Expenses which are excluded:

- ✗ Dental treatment, unless such treatment is necessarily required to teeth other than dentures and is caused by the injury
- ✗ Medicare benefits and any gap
- ✗ Private Health contributions

Funeral Expenses

If a Member suffers an Accidental Death this policy covers the expenses of burial or cremation OR the cost of returning the Members body or ashes to their country or place of residence up to the amount shown below.

Funeral Expenses	<ul style="list-style-type: none">• \$5,000 any one claim
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Other Benefits - Applicable to non-income earners only

If an active Member is a non-income earner the policy may entitle Members to claim the following benefits.

Student Tutorial Cost

If a Member is a full time student and suffers an injury and they are unable to attend registered classes we will pay for the costs reasonably and necessary incurred for home tutorial services up to \$200 per week payable from the 8th day of treatment for a maximum period of 26 weeks provided that such fees are carried out by a professionally qualified tutor who continues teaching you during the period of disability and are deemed necessary for your recovery by your Medical Practitioner.

Emergency Home Help Clause

If a Member is retired, unemployed or not in receipt of a salary and suffer from an injury and unable to carry out domestic duties, we will pay for the cost of hiring domestic help and/or child minding services up to \$200 per week payable from the 8th day of treatment for a maximum period of 26 weeks, provided such services are:

- Carried out by persons other than members of the insured Member's family or other relatives or persons permanently living with the Member.
- Certified by a legally qualified medical practitioner as being necessary for your recovery.



Out of Pocket Expenses

If you suffer an injury and incur reasonable out of pocket expenses attributable to your disablement and will pay up to a maximum of \$1,000 upon receipts for such expenses.

Physical damage to property is not an expense that is deemed to be directly attributable to the disablement and the ability to perform normal everyday activities

The entitlements listed under Other Benefits are not available to income earners.



Table of Benefits

THE EVENTS	THE BENEFIT
Injury resulting directly in the following Event(s), which occur within twelve (12) months of the date of the injury:	Being a percentage of the amount shown in the Schedule against Part A – Lump Sum Benefits for each insured person
1. Accidental Death	100%
2, a. Permanent Total Disablement - persons 65 years and under b. Paraplegia/Quadriplegia – persons 66 to 79 years	100%
3. Paraplegia or Quadriplegia	100%
4. Loss of sight of both eyes	100%
5. Loss of sight of one eye	100%
6. Loss of use of two Limbs	100%
7. Loss of use of one Limb	100%
8. Permanent and incurable insanity	100%
9. Loss of hearing in:-	
(a) both ears	80%
(b) one ear	20%
10. Permanent Loss of use of four Fingers and Thumb of either Hand	80%
11. Permanent Loss of the lens of one eye	60%
12. Permanent Loss of use of four Fingers of either Hand	50%
13. Third degree burns and/or resultant disfigurement which covers more than 40% of the entire external body	50%
14. Permanent Loss of use of one Thumb of either Hand:-	
(a) both joints	30%
(b) one joint	15%
15. Permanent Loss of use of Fingers of either Hand:-	
(a) three joints	10%
(b) two joints	7.5%
(c) one joint	5%
16. Permanent Loss of use of Toes of either Foot:-	
(a) all - one Foot	15%
(b) great – both joints	5%
(c) great – one joint	3%
(d) other than great - each Toe	1%
17. Fractured leg or patella with established non-union	10%
18. Shortening of leg by at least 5 cm	7.5%
19. Permanent Disability not otherwise provided for under Events 9 to 18 inclusive. (Available only to Members up to 65 years of age)	Such percentage of the Sum Insured as We shall in Our absolute discretion determine and being in Our opinion not inconsistent with the compensations provided under Insured Events 9 to 18 inclusive. The maximum amount payable is \$60,000.
20. Temporary Total Disablement	During such disablement, the Weekly Benefit shown on the Schedule against Part B Weekly Benefits – Injury, but not Exceeding the Salary of the Insured Person.
21. Temporary Partial Disablement	40% of the amount payable for Event 20.

IMPORTANT NOTICES APPLICABLE TO ALL COVERS

About this Policy

Show Horse Council of Australasia Inc does not act as the Insurer's agent and does not hold an Australian Financial Services License. (SHCA) is not authorised to provide you with any insurance advice so if you require any information about this insurance, please contact our broker, Aon Risk Solutions on 1800 806 493 or email them at au.equestrian@aon.com. Please note that Aon has arranged this Policy on behalf of SHCA.

Financial Services Guide

Aon's Financial Services Guide contains important information about the products and services we offer. It also explains how we, and our representatives, may be remunerated and contains details of conflicts of interest, and how we manage them, and our internal and external complaints handling procedures. Our Financial Services Guide is available at www.aon.com.au.

Master Policy Notice

Where cover is provided under a master policy an aggregate limit may be applicable which is shared by all insured persons. This limit may be eroded or completely exhausted by claims made under the master policy by other insured persons covered under the master policy.

Binder Agreement and General Advice Warning

In arranging this policy, Aon is acting under a binder agreement from the insurer. When acting under a binder, Aon will be acting under an authority given to it by the insurer and will be effecting the insurance contract as agent of the insurer and not as your agent. Our binder arrangement with the insurer is such that we remain your agent in the handling of any claim. Any information provided about this policy is general in nature and does not take into account your particular objectives, financial situation and needs. Before making a decision, you should carefully consider all information provided to you including the policy wording and comparative table of coverage terms.

Providing information to us

It is important that before you enter into a contract of insurance, you notify us of everything that is material to the risk. This will help us to properly understand your insurance requirements and also to arrange the most appropriate insurance cover for you. If you do not provide the insurer with this information, it is possible that the insurer may be entitled to reduce its liability under the contract in respect of a claim and/or may cancel the contract. If your non-disclosure is fraudulent, the insurer may avoid the contract from its commencement. If you are uncertain about whether or not a particular matter is material to the risk, then please contact us so that we can discuss this with you.

Changes of circumstances must be notified

It is also important that you advise us of any changes to your business or circumstances (including location change or nature of business activities) that may occur once you have arranged the insurance so that we can take the necessary steps to make sure that you are adequately insured. A failure to advise the insurer of such changes may prejudice your cover.

Understanding your policy terms and conditions

It is important that you understand the terms and conditions of your insurance policy including any limits of liability or deductibles that apply and also what responsibilities you have under the policy. Please read the policy and quotation schedule carefully and if there is anything that is incorrect or that you don't understand, please contact us immediately so that we can resolve the matter with you.

Average or co-insurance

Some policies contain an "average" (sometimes called "co-insurance") clause. If you under insure, your claim may be reduced in proportion to the amount of under insurance. If you do not want average to apply, you must ensure that the level of your insurance is adequate whenever you take out or renew a policy. If your insurance is on a "reinstatement and replacement" basis (ie. "new for old"), the sum insured must be for the full cost of replacing the insured property with new property.

Claims Made

This Policy is a claims made contract of insurance. This means that policy responds to claims first made against you and notified to the insurer in writing during the period of insurance provided that such claim arises from and an act or omission occurring after the retroactive date.

Retroactive Date

The policy coverage is limited to acts and omissions that occur or are alleged to have been committed on or after the retroactive date. For example, if you have a retroactive date of 1 July 2013, the policy will not cover a claim arising from acts or omission occurring prior to that date. Please ensure that the retroactive date you select is sufficient and that you have no uncovered periods for which you require professional indemnity insurance.

Non Admission of Liability & Subrogation

This policy contains provisions which have the effect of excluding or limiting the insurer's liability in respect of a loss where you have admitted liability or prejudiced the insurer's rights of subrogation where you are a party to an agreement which excludes or limits insurer's rights to recover the loss from another party.

Interest of other parties

Your policy may exclude cover for an interest in the insured property held by someone other than the named insured, unless that interest is specifically noted on the policy. For example, if property is jointly owned, or subject to finance, the interest of the joint owner or financier may be excluded if it is not specifically noted on the policy. Generally, the safest course is always to have all interests in all property insured noted on each policy. If anyone other than you has an interest in property you are insuring, please let us know.

Utmost good faith

Every contract of insurance is based on utmost good faith requiring each party to act towards the other party with the utmost good faith. If you fail to do so you may prejudice any claim or the continuation of cover.

Waiver of rights

Some policies contain a clause which limits or excludes claims where the insured has limited its rights to recover a loss from another party in circumstances where that other party is responsible for the loss. For example, this may happen where you have entered into a contract which limits the liability which the other contracting party would have been under in the absence of the contract. If you have entered into, or propose to enter into a contract which might limit your right against another contracting person, please let us know immediately.

Privacy

Aon is committed to protecting your personal information in accordance with the Australian Privacy Principles under the *Privacy Act 1988* (Cth). We collect, use and disclose personal information to offer, promote, provide, manage and administer the many financial services and products we and our group of companies are involved in as set out in the Aon Privacy Notice. In order to do this, we may also share your information with other persons or entities who assist us in providing or promoting our services as set out in the Aon Privacy Notice. Further information about our privacy practices can be located in the Aon Australia Group Privacy Policy Statement which can be viewed on our website at www.aon.com.au or a copy can be sent to you on request by your Aon representative. You may also gain access to your personal information, or modify your privacy preferences, by contacting your Aon representative or our Privacy Officer at:

Privacy Officer –

By email: privacyofficer@aon.com.au
By mail: Level 33, 201 Kent Street Sydney NSW 2000
By phone: (02) 9253 7000

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