

# OPTIONAL UPGRADE FORM

FOR PERIOD: 1<sup>ST</sup> NOVEMBER 2018 TO 1<sup>ST</sup> NOVEMBER 2019

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:

[www.jltsport.com.au/afl](http://www.jltsport.com.au/afl)



<b>Please send your completed Upgrade Form to: JLT Sport</b>		
<b>POST</b> PO Box H25 AUSTRALIA SQUARE NSW 1215	<b>EMAIL</b> <a href="mailto:JLTSport@JLTA.COM.AU">JLTSport@JLTA.COM.AU</a>	<b>FAX:</b> (02) 8824 1690



## STANDARD COVERS WITHIN THE PROGRAMME:

### WHAT ARE PLAYERS COVERED FOR AUTOMATICALLY WITHIN THE NATIONAL RISK PROTECTION PROGRAMME?

All Players receive the following standard covers within the Australian Football National Risk Programme as per the policy wordings, terms and conditions outlined at [www.jltsport.com.au/afl](http://www.jltsport.com.au/afl)

#### STANDARD COVERS PROVIDED:

- Personal Accident Cover including
  - o Capital Benefits (Bronze level) maximum \$100,000 (Quadriplegia / Paraplegia max \$1,000,000)
  - o 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 .... form for further details).

### HOW DO I PURCHASE LOSS OF INCOME COVER?

1. Complete Section A and Section B of the Upgrade Form.
2. Forward the completed form to JLT Sport
3. Loss of Income Purchases are valid from the date JLT Sport receives this form and are subject to 14 day credit terms.

Please note: the advice contained in this form is general. To help you decide if the cover suits you, please read the Product Disclosure Statement. We are also happy to provide you with further information.

JLT Sport is a division of Jardine Lloyd Thompson Pty Ltd,  
 ABN 69 009 098 864, AFS Licence No. 226827,  
 Level 8 570 Bourke Street, Melbourne, VIC, 3000.

# SECTION A - UPGRADE DETAILS

## Step 1: Player Details

1	_____	2	_____
	Club Name		Association/League
3	_____	4	_____
	Insured Player		Contact Phone Number
5	_____	_____	_____
	Postal Address	State	Post Code
6	_____		
	Email Address		

## Step 2: Total Amount Payable

Total

Section B (Non Football Related Income ) Sub-total	_____
Section C (Football Income – Match Payments) Sub-total	\$ _____
Grand Total – Total Amount Payable	\$ _____

## Step 3: Player Declaration

I, the undersigned, declare

(a) I have read the PDS and agree to be bound by the Rules. I am aware that the withdrawal from the JDT Arrangement as a Member does not entitle the Member to a refund of the Total Membership Contribution in full or in part, other than any applicable return Membership Contribution in respect of the unexpired portion of the Insurance Cover.

(b) I agree to receive the PDS, FSG and annual report for this product online at [www.jltsport.com.au/afi](http://www.jltsport.com.au/afi) or I have obtained a hard copy of the PDS and FSG. I have reviewed those documents including the "Important Information" section of the FSG.

(c) Privacy Act implications: Upon joining the JDT Arrangement, you as a Member, acknowledge that, as part of the financial reports, the Trustee will be declaring Members' detailed Claims data to all Members and service providers performing specific tasks on behalf of the Trust.

\_\_\_\_\_  
Name (please print)

\_\_\_\_\_  
Signature

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Date

## Step 4: Submit your Upgrade Form

Postal Address: PO BOX H25 AUSTRALIA SQUARE NSW 1215  
 Email Address: [jltsport@jlta.com.au](mailto:jltsport@jlta.com.au)  
 Fax: 02 8824 1690

## Step 5: Making payment

JLT Sport will provide you with a Tax Invoice AFTER we receive this application form which will detail the payment options. Payment must be made within 14 days of receipt of the invoice.

If you would like to make payment for upgraded cover via monthly instalments, please tick the box below and we will send you a Pay by the Month contract for your review. If acceptable and you wish to take advantage of this offer, please complete, sign and return to us as soon as possible.

Pay by the Month

# SECTION B



## LOSS OF INCOME COVER PURCHASE - INDIVIDUALS NON-FOOTBALL RELATED INCOME



The AFL National Risk Protection Programme JLT Discretionary Trust (JLT) Arrangement. ABN: 37 378 340 834

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 full-time, part-time or casual employment).

TABLE (A) Loss of Income Rates for Individuals (non-football related income)

Grade	Per \$50.00 Cover
Senior/Reserve/Women's Players	\$84.00
Junior Players	\$31.00

Step 2: Loss of Income Cover Calculation for Individual Players (non-football related income) – refer to TABLE (E) above

Grade	Player's Full Name	Date of Birth	Player's Occupation	Income Cover	Number of units	Sub Total
Senior	John Smith	11/07/1975	Bricklayer	\$500.00 per week	10 units	\$840.00
Junior	Joe Bloggs	07/11/1991	Apprentice Carpenter	\$300.00 per week	6 units	\$186.00

Section B Total Amount Payable	Total
Section B Total	\$ _____

Please forward all of Sections A, B and C to JLT Sport.

Please send your completed Upgrade Form to: JLT Sport

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#### IMPORTANT INFORMATION:

- o All rates on this form are inclusive of all government charges, GST and fees
- o The players are only covered whilst representing the club noted on this form
- o 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.
- o 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.
- o The elimination period applicable is 14 days
- o 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 the only the players listed will be covered.
- o 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.

## SECTION C



## LOSS OF INCOME COVER PURCHASE - INDIVIDUALS

### FOOTBALL INCOME - MATCH PAYMENTS



The AFL National Risk Protection Programme JLT Discretionary Trust (JLT) Arrangement. ABN: 37 378 340 834

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 2019 football season only

TABLE (F) Loss of Income Rates for Individuals (football income)

	Weekly Cover (gross earnings)	Cost (per season)
Option 1	\$100 cover per week	\$164
Option 2	\$200 cover per week	\$328
Option 3	\$300 cover per week	\$490
Option 4	\$400 cover per week	\$654
Option 5	\$500 cover per week	\$814

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
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Section B Total Amount Payable

Total

Section C Total

\$ \_\_\_\_\_

Please forward all of Sections A, B and C to JLT Sport

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#### IMPORTANT INFORMATION:

- o All rates on this form are inclusive of all government charges, GST and fees
- o The players are only covered whilst representing the club noted on this form
- o The benefit payable is limited, subject to the Trustee's discretion, to the lesser of the selected amount or 80% of net weekly football match payments. Please note that actual payments made to the claimant are made net of tax.
- o The elimination period applicable is 21 days (as purchased by the club), unless your sick leave balance exceeds this, in which case your sick leave balance becomes your elimination period
- o 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.