



FROM - TO		POLICY NUMBER	
31/12/08	31/12/09	POLICY SCHEDULE	15 A026155 PAD
AT400/dm			

HORSELL INTERNATIONAL PTY LTD
P O BOX N661
GROSVENOR PLACE
SYDNEY NSW 1220

PERSONAL ACCIDENT GROUP

THIS POLICY SCHEDULE INDICATES THE COVER YOU HAVE SELECTED FOR THE PERIOD SHOWN. IT FORMS PART OF AND MUST ALWAYS BE READ IN CONJUNCTION WITH THE POLICY WORDING SUPPLIED. PLEASE CHECK THE POLICY DETAILS AS SET OUT BELOW AND LET US KNOW IF ANY CHANGE IS NECESSARY.

THE INSURED
SKATE AUSTRALIA INC.

GROUP POLICY

SPORT

INSURED PERSONS
CATEGORY 1: REFER GENERAL PAGE

TIME OF OPERATION OF COVER
CATEGORY 1
TIME OF OPERATION OF COVER ACTIVITIES & ASSOCIATED TRAVEL
Cover under this policy shall apply whilst the insured person is engaged in officially sanctioned activities involving:
* participating in club, representative, state or national events
* training arranged by the insured
* in an administrative capacity as an official or trainer or fund-raiser.
Cover shall also include
* travelling directly to and from the above sanctioned activities and;
* staying away from home whilst engaged in the above sanctioned activities.

GEOGRAPHICAL LIMIT: WORLDWIDE

AGGREGATE LIMIT OF LIABILITY: \$3,000,000

SECTIONS INSURED

A: CAPITAL BENEFITS (ACCIDENT ONLY COVER)

STAMP DUTY REQUIREMENTS

WESTERN AUSTRALIA WESTERN AUSTRALIA STAMP DUTY PAID	TASMANIA TASMANIAN STAMP DUTY PAID	QUEENSLAND QUEENSLAND STAMP DUTY PAID
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Important Information about Your Duty of Disclosure appears on the back of this schedule and on your application form. Please read this information carefully.

POLICY PAYMENT SLIP		SKATE AUSTRALIA INC.	
WITH THE COMPLIMENTS OF OUR STAFF AT: LEVEL 2, 85 HARRINGTON ST SYDNEY		POLICY NO:	15 A026155 PAD
QBE INSURANCE (AUSTRALIA) LTD GPO BOX 4108 SYDNEY *** PH: (02)8275 9999 *** 2001		DUE DATE:	31/12/2008
		ACCOUNT NO:	15 0004011
		INTM REF NO:	
		AMOUNT PAYABLE	



FROM TO		POLICY NUMBER	
31/12/08	31/12/09	POLICY SCHEDULE	15 A026155 PAD

AT 4:00 p.m.

HORSELL INTERNATIONAL PTY LTD
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 GROSVENOR PLACE
 SYDNEY NSW 1220

PERSONAL ACCIDENT GROUP

** PAGE 2 **

THE INSURED

SKATE AUSTRALIA INC.

CATEGORY 1
 CAPITAL SUM INSURED: \$50,000 1-30

B: WEEKLY ACCIDENT BENEFITS (ACCIDENT ONLY COVER)
 CATEGORY 1
 WEEKLY BENEFITS: \$350
 EXCL PERIOD OF CLAIM: 1 WEEKS
 BENEFIT PERIOD: 52 WEEKS

D: INJURY ASSISTANCE BENEFIT (ACCIDENT ONLY COVER)
 CATEGORY 1
 WEEKLY BENEFITS: \$350
 EXCL PERIOD OF CLAIM: 1 WEEKS
 BENEFIT PERIOD: 52 WEEKS

E: MEDICAL EXPENSES - AUSTRALIA ONLY (ACCIDENT ONLY COVER)
 CATEGORY 1
 SUM INSURED: \$2,000
 EXCESS: \$50
 LIMITED TO 85% OF EXPENSES INCURRED

CLAUSES:
 CATEGORY 1:

Injury Rehabilitation Benefit
 If an insured person is paid a weekly benefit under Section B - Weekly Benefits - Injury we will also pay for costs incurred by the insured person for participation in
 1. Workers Return Assistance

STAMP DUTY REQUIREMENTS

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** PAGE 3 **

THE INSURED
SKATE AUSTRALIA INC.

(a) Professional assistance to improve the insured person's physical and emotional condition.
(b) Pain management therapy.
(c) Work task analysis to determine the need for special equipment and modifications.
(d) Advice and assistance necessary to assist the insured person's gradual return to work.

2. Vocational Assessment
(a) Assistance in the choice of a new job and placement in that job taking into account the insured person's interests, skills and disability and the labour market.
(b) Simulated work environment experience.
(c) Development of further work skills through education and on the job training.

3. Personal and Family Counselling
(a) Professional assistance to help the insured person cope with their disability and live an independant life.
(b) Financial Counselling.

if
* we consider them reasonable and
* the insured person's medical practitioner agrees and
* such expenses have not been reimbursed under any other section of the Policy
up to a maximum of \$3500

Lifestyle Modification Benefit
If an insured person is paid a capital benefit under any of payable conditions 2,4,5 or 7 we will also pay for the cost necessarily

STAMP DUTY REQUIREMENTS

WESTERN AUSTRALIA
WESTERN AUSTRALIA
STAMP DUTY PAID

TASMANIA
TASMANIAN STAMP
DUTY PAID

QUEENSLAND
QUEENSLAND STAMP
DUTY PAID

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THE INSURED

SKATE AUSTRALIA INC.

incurred by the insured person in modifying

- * their motor vehicle or
- * their home or
- * in relocating to a suitable home

up to a maximum of \$10000

Additional Benefit Funeral Benefit

We will pay funeral expenses incurred to a maximum of \$6,000 following the death of an insured person during the period of insurance as a result of an injury or illness that occurs during the period of insurance. The funeral benefit is payable if death occurs within 12 months of the date of injury or illness. The exclusions that apply to the other sections of this policy apply equally to this additional benefit.

REDUCED DEATH BENEFIT
 IT IS HEREBY DECLARED AND AGREED THAT SECTION A EVENT 1 (ACCIDENTAL DEATH) COVER IN RESPECT OF INSURED PERSONS UNDER 18 YEARS SHALL BE LIMITED TO \$10000.

NON-MEDICARE MEDICAL EXPENSES
 IT IS HEREBY DECLARED AND AGREED THAT THE EXCESS OF \$50 EACH AND EVERY CLAIM NOTED UNDER THIS BENEFIT IS NOT APPLICABLE IN RESPECT OF CLAIMANTS

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THE INSURED
SKATE AUSTRALIA INC.

WHO HOLD PRIVATE HEALTH INSURANCE.

 CATEGORY 1:
 ALL MEMBERS, COACHES, UMPIRES, OFFICIALS, FIRST AID PERSONNEL, ADMINISTRATORS AND VOLUNTARY WORKERS OF THE INSURED.

 BUSINESS DESCRIPTION:
 PRINCIPALLY ADMINISTRATION, PROMOTION, ORGANISATION PARTICIPATION AND CONTROL OF SKATING ACTIVITIES IN AUSTRALIA INCLUDING ARTISTIC, ROLLER HOCKEY, ROLLER DERBY, SPEED, INLINE HOCKEY, FREESTYLE SKATEBOARDING AND ROLLERBLADING, TRAINING SESSIONS, SCHOOL PROMOTIONS AND COMPETITIONS, CHARITY ACTIVITIES, COACHING, UMPIRING/REFEREEING, THE RENDERING OF FIRST AID, PROVISION OF FOOD AND DRINK PUBLICATION OF NEWSLETTERS, SALE OF MERCHANDISE, PROPERTY OWNERS OR PROPERTY OCCUPIERS OF STADIUMS AND OTHER PROPERTIES, SOCIAL ACTIVITIES INCLUDING AWARDS PRESENTATIONS, FUNDRAISING, BBQ'S AND OTHER GATHERINGS AND OTHER ACTIVITIES CARRIED OUT BY SKATE AUSTRALIA INC., SKATEBOARDING AUSTRALIA PTY LTD., INLINE HOCKEY AUSTRALIA PTY LTD AND THEIR AFFILIATED BODIES IN THE COURSE OF CONDUCTING OR PROMOTING THE SPORT.

ABN: Tax Status: Not Registered Tax %: 0.00

PREMIUM	STAMP DUTY	GST	TOTAL
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** PAGE 6 **

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***** THIS NOTICE WILL BECOME A "TAX INVOICE" WHEN THE AMOUNT PAYABLE *****
***** IS PAID IN FULL. SHOULD CHANGES BE MADE, THEN THE NEW SCHEDULE *****
***** ISSUED WILL BECOME YOUR TAX INVOICE. *****

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Duty of Disclosure - What you must tell us

Under the Insurance Contracts Act 1984 (the Act), you have a Duty of Disclosure. The Act requires that before a policy is entered into, you must give us certain information we need to decide whether to insure you and anyone else to be insured under the policy, and on what terms. Your Duty of Disclosure is different, depending on whether this is a new Policy or not.

New business

Where you are entering into this Policy for the first time (that is, it is new business and is not being renewed, varied, extended or reinstated) you must tell us everything you know and that a reasonable person in the circumstances could be expected to tell us, in answer to the specific questions we ask.

When answering our questions you must be honest.

• Who needs to tell us

It is important that you understand you are answering our questions in this way for yourself and anyone else whom you want to be covered by the Policy.

• If you do not tell us

If you do not answer our questions in this way, we may reduce or refuse to pay a claim, or cancel the Policy. If you answer our questions fraudulently, we may refuse to pay a claim and treat the Policy as never having worked.

Renewals, variations, extensions and reinstatements

Once your Policy is entered into and is no longer new business then your duty to us changes. You are required before you renew, vary, extend or reinstate your Policy, to tell us everything you know and that a reasonable person in the circumstances could be expected to know, is a matter that is relevant to our decision whether to insure you, and anyone else to be insured under the Policy, and if so, on what terms.

• You do not have to tell us about any matter

- that diminishes the risk
- that is of common knowledge
- that we know or should know in the ordinary course of our business as an insurer, or
- which we indicate we do not want to know.

• If you do not tell us

If you do not comply with your Duty of Disclosure we may reduce or refuse to pay a claim or cancel your Policy. If your non-disclosure is fraudulent we may treat this Policy as never having worked.

MAIL ORDER FACILITY

If you wish, the full amount of this premium may be debited to your credit card account. Your signature is an authority to us to issue a MasterCard/Visa Card Sales Voucher for the amount payable, and is also an acknowledgement that the Sales Voucher, if endorsed "mail order" is to be treated as having been signed by the cardholder.

Tick one box Mastercard Visa

Card number

Expiry Date

For the Amount of \$

Card Holder's Name

Card Holder's Signature

Date / /

Underinsurance

The classes of insurance listed below contain provisions as to average and underinsurance. This means we require you to insure for the full value or maximum potential risk. If you do not do so, and you are underinsured, we will pay you less in the event of a claim, calculated by a formula in the policy which takes account of the degree of underinsurance.

Classes of insurance containing underinsurance clauses:

- Business Pack Insurance
- Contractors Plant and Machinery
- Construction/Liability
- Trades Pack Insurance
- Office Pack Insurance
- Fire
- Industrial Special Risks
- Farm Pack Insurance
- Loss of Profits
- Machinery and Electronic

Insurer

This Policy is issued by QBE Australia ABN 78 003 191 035, AFS Licence No. 239545 of 82 Pitt Street Sydney.