

Bluefin



Insurance Solutions

Hellenic football league Group personal accident insurance

Summary of benefits and premiums

Valid from 1st July 2011

Underwritten by



Hellenic football league Group personal accident scheme

Protection for your players and officials

If a player is injured during a match there is a good chance they could miss a couple of matches or, even worse, be unable to earn a living for weeks or in some cases many months. The financial impact to your player and his family could be significant.

This group personal accident product provides insurance exclusively arranged by Bluefin and underwritten by ACE European Group Limited. It has been specifically created to meet the requirements of clubs and players connected to the Hellenic football league.

When you are covered

When you join, the scheme operates whilst at any ground or premises worldwide where there is an agreed fixture or organised training and includes travelling directly to and from such activities.

The policy has been extended to include club social events but excluding hazardous events such as, fireworks, bonfires, driving events, bouncy castles, water sports, anything at a height above 3 metres from ground level (eg bungee jumping).

Who is covered

The policy will include:

- Players
- Committee members
- Managers
- Trainers
- Assisting referees and officials

What are the main exclusions?

Other than accidents caused whilst travelling by motorcycle or injuries associated with arthritis there are few exclusions. Please see the policy for full details.

Your demands and needs

This product is designed to meet the demands and needs of football clubs associated to the Hellenic League that wish to protect their members against consequences of accidents whilst playing in, training for or travelling to a club fixture resulting in accidental injury, death or disability.

The level of cover you choose will dictate whether cover includes a weekly benefit for temporary disability in addition to the one-off lump sums for permanent disability. The levels of cover are explained more fully overleaf.

This statement does not constitute advice or a personal recommendation for our Personal Accident insurance products. Should you require advice please contact Bluefin.



Hellenic league scheme - the next step

Details of the benefits can be found overleaf. This scheme operates from a set period each year - 1 July to 30 June inclusive.

The premium and expiry date remain the same regardless of when you join the scheme.

A completed proposal form with the relevant payment needs to be sent to the Hellenic league secretary who liaises with Bluefin on your behalf.

Call Us:

0845 872 5060

Email Us:

footballpa@bluefingroup.co.uk

Write to Us:

Bluefin, Castlemead, Lower Castle Street, Bristol, BS1 3AG

Hellenic football league

Group personal accident scheme

Adult teams

Benefit	All scales of cover
Accidental death	£30,000
Loss of sight	£30,000
Loss of hearing : one ear both ears	£7,500 £30,000
Loss of limb	£30,000
Loss of speech	£30,000
Loss of internal organ	£7,500
Permanent total disablement (including permanent partial disablement ¹)	Up to £30,000
Rehabilitation and Retraining Expenses	Up to £2,500
Extra travel expenses (benefit period - 4 Weeks)	Up to £25 per week
Hospitalisation benefit (benefit period - 13 weeks)	£20 per day
Emergency dental (pain relief) expenses	Up to £200
Broken bones (legs, collar, arms &/or cheek bone only)	£100
Home help (temporary total disablement extension)	Includes being a full time house wife or house husband as an occupation
Emergency medical expenses	Up to £500
Legal advice helpline	Operates 24 hours a day, 365 days a year

Benefit scale	Level 1	Level 2	Level 3
Temporary total disablement (TTD) ** (per week)	£50	£75	£100
TTD deferment period***	14 Days	14 Days	14 Days
TTD benefit period	104 Weeks	104 Weeks	104 Weeks

Premiums

Per 11 a side team inc IPT*	£177	£223	£324
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*IPT= Insurance Premium Tax at 6%. Premium are based on 12 months cover

- The maximum age limit for players is 55 and club officials 75 years of age.
- **Other than Students where the TTD benefit shall not exceed £25 per week and is payable up to a maximum of 6 weeks.
- ***TTD deferment period refers to the first period of incapacity that is excluded from cover.
- The TTD benefit does not apply to those individuals without employment or whose sole employment is football.
- There is no cover for professional footballers.
- No requirement to name players and no restriction to the number of players within a team.

¹ Many personal accident policies will only pay under this benefit if you are 100% disabled but our policy will pay a percentage relative to your level of disability - this is known as permanent partial disablement.

Additional benefits available per team

Loss of teeth (including partial)	up to £200
Broken bones additional 'top up'	£50
Physiotherapy cover ²	Up to 50% of costs up to a maximum of £25 per week for up to 6 sessions.

Additional premium

Per 11 a side team inc IPT*	£31
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*IPT= Insurance Premium Tax at 6%. Premium are based on 12 months cover

² If an accident occurs during the period of insurance and effective time that causes bodily injury to an insured person and directly results in a valid temporary total disablement claim or broken bones claim under this policy, the insurer will pay the insured person 50% of the costs for each session of necessary physiotherapy incurred within 12 months of bodily injury, up to a maximum of £25 per visit, for total of 6 sessions provided that the insured person has a written referral from their General Practitioner for physiotherapy arising from such bodily injury. **This cover does not apply if treatment has been provided by the NHS or claimed for under a current private medical insurance or any other insurance policy.**

Please note

The information provided is an illustration only. Please also refer to the summary of cover document which is available at www.hellenicleague.co.uk or can be obtained from Bluefin. Exclusions and limitations apply. For full terms and conditions please contact Bluefin for a copy of the policy documentation.

Youth teams

Hellenic football league Group personal accident scheme

Benefit	Scale: Bronze	Silver	Gold	Platinum
Accidental death	£10,000	£10,000	£10,000	£10,000
Loss of sight	£15,000	£25,000	£50,000	£75,000
Loss of hearing : one ear both ears	£3,750 £15,000	£6,250 £25,000	£12,500 £50,000	£18,750 £75,000
Loss of limb	£15,000	£25,000	£50,000	£75,000
Loss of speech	£15,000	£25,000	£50,000	£75,000
Loss of internal organ	£3,750	£6,250	£12,500	£18,750
Permanent total disablement (including permanent/partial disablement ¹)	Up to £15,000	Up to £25,000	Up to £50,000	Up to £75,000
Emergency dental (pain relief) expenses, £25 excess applies	£100	£150	£200	£250
Emergency first aid expenses - up to	£100	£150	£200	£250
Broken bones - legs arms, collar &/or cheek bone	£150	£150	£200	£250
Broken bones - fingers and toes	£50	£50	£50	£50
Hospitalisation benefit , 28 days benefit period	£15 per day	£15 per day	£15 per day	£15 per day
Rehabilitation and Retraining Expenses	Up to £2,500	Up to £2,500	Up to £2,500	Up to £2,500
Legal advice helpline	Operates 24 hours a day, 365 days a year			
Temporary total disablement (TTD)** weekly benefit for club officials only	£50 per week	£50 per week	£50 per week	£50 per week
TTD weekly excess period***	14 days	14 days	14 days	14 days
TTD weekly benefit period	52 Weeks	52 Weeks	52 weeks	52 weeks
Loss of teeth (including partial)	N/A	N/A	N/A	up to £250
Physiotherapy cover	N/A	N/A	N/A	Up to 50% of costs up to a maximum of £25 per week for up to 6 sessions
Parent/legal guardian inconvenience benefit (In the event of unforeseen travel expenses due to an accident)	N/A	N/A	N/A	Up to £100 in the event of unforeseen travel costs due to an accident
Temporary total disablement (TTD) for 16 to 18 year olds employed for at least 16 hours or more	N/A (available as additional benefit - see below)	N/A (available as additional benefit - see below)	N/A (available as additional benefit - see below)	£35 per week, benefit period 52 weeks, subject to 14 day excess.

Premiums

Per 11 a side team inc IPT*	£19	£26	£31	£41
Per Mini Soccer Team inc IPT*	£16	£18	£23	£31

*IPT= Insurance Premium Tax at 6%. Premium are based on 12 months cover

- The maximum age limit for players is 18 and club officials 75 years of age.
- **The TTD benefit does not apply to those individuals without employment or whose sole employment is football
- ***TTD deferment period refers to the first period of incapacity that is excluded from cover.
- There is no cover for Professional Footballers.
- No requirement to name players and no restriction to the number of players within a team.

¹ many Personal Accident policies will only pay under this benefit if you are 100% disabled but our policy will pay a percentage relative to your level of disability - this is known as a permanent partial disablement.

Additional benefits available (please note automatically included under Platinum level)

Temporary Total Disablement Cover	£35 per week
For 16 to 18 year olds that are employed for at least 16 hours a week	Benefit period 52 weeks subject to 14 days excess period

Additional premium

Per 11 a side team inc IPT*	£21
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*IPT= Insurance Premium Tax at 6%. Premiums are based on 12 months cover

Please note

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About our insurance services

1. The Financial Services Authority (FSA)

The FSA is the independent watchdog that regulates financial services. It requires us to give you this document. Use this information to decide if our services are right for you.

2. Whose products do we offer?

- We offer products from a range of insurers.
- We only offer products from a limited range of insurers
- We only offer a product from ACE European Group Limited to satisfy the Personal Accident insurance requirements of the applicable clubs that are associated to the Ryman football league

3. What will you have to pay us for our services?

- No fee for arranging the ACE European Group Limited Personal Accident insurance policy.

You are entitled, at any time, to request information regarding any commission which we may have received as a result of placing your insurance business

4. Who regulates us?

Bluefin Insurance Services Limited, 5 Old Broad Street, London, EC2N 1AD is authorised and regulated by The Financial Services Authority. Our FSA Reference Number is 307899

Bluefin Insurance Services Limited permitted business is advising, arranging and administering (including handling claims) general insurance contracts.

You can check this on the FSA's Register by visiting the FSA's website www.fsa.gov.uk/register or by contacting the FSA on 0845 606 1234

5. Ownership

Bluefin Insurance Services Limited is an insurance intermediary ultimately controlled by AXA UK Plc through our parent, Bluefin Insurance Group Limited.

6. What to do if you have a complaint?

If you wish to register a complaint, please contact us:

in writing: Complaints Officer
 Bluefin Insurance Services Limited
 Cl Tower
 St George's Square
 New Malden
 Surrey KT3 4TP
by phone: 020 8336 2000
by fax: 020 8949 6226
by email: insurance.complaints@bluefingroup.co.uk

If you cannot settle your complaint with us, you may be entitled to refer it to the Financial Ombudsman Service.

7. Client and Insurer Money

When we receive premium payment from you or premium refund from your insurer, ACE European Group Limited, ("ACE") we hold these on behalf of ACE as determined by the Terms of Business Agreement we have in place with them. This protects you against the risk of our insolvency as the money is deemed

to have been immediately received by ACE. However, ACE will not have fulfilled their obligation to pay a premium refund to you until we pay those monies to you. Equally, once we have received a premium payment from you, we shall be unable to refund that premium to you without the consent of ACE.

Insurer Money and/or Client Money (that is money held on your behalf or as deemed to be Client Money by the FSA Client Money Rules) will be held in a Non-Statutory Trust Account and in accordance with such rules. A copy of these rules is available at the FSA website www.fsa.gov.uk Under the terms of a Non-Statutory Trust, general creditors are not able to make claims on such money. We are entitled to use Client Money held on behalf of one customer to pay another customer's premium before the premium is received from that other customer and to pay premium refunds before we receive payment from the insurer. However, we are not entitled to use Client Money to take our commission payments before we receive the relevant premium payment from the customer.

We may hold both Insurer and Client Money in the same bank account but when this happens insurers will have previously agreed that any claim by you on monies that are Client Money will come before their claim.

Unless we receive your written instruction to the contrary, we shall treat receipt of payment from you and refund of premium which fall due to you, as being within your informed consent to the payment of those monies into a Non-statutory Trust Account. Interest earned on Client and Insurer Money held by us is retained by us.

8. Are we covered by the Financial Services Compensation Scheme (FSCS)?

We are covered by the FSCS. You may be entitled to compensation from the scheme if we cannot meet our obligations. This depends on the type of business and the circumstances of the claim.

Further information about compensation scheme arrangements is available from the FSCS.

9. The capacity in which we are acting

As an insurance intermediary we usually act as your agent and are therefore subject to the law of agency which imposes various duties on us. In the case of this personal accident insurance we act for and owe duties of care to insurers and the following table is provided to advise you when and how this arises so you will be aware of any possible conflicts of interest.

Sourcing a suitable policy (i.e. when we get quotes for you)	We act as your agent	<input type="checkbox"/>
	We act as agent of the insurer	<input checked="" type="checkbox"/>
Placing the insurance (i.e. when we arrange for your cover to start)	We act as your agent	<input type="checkbox"/>
	We act as agent of the insurer	<input checked="" type="checkbox"/>
In the event of a claim	We will act as your agent	<input checked="" type="checkbox"/>
	We will act as agent of the insurer	<input type="checkbox"/>

Delegated Authority - The terms for this policy have been provided using an authority delegated to Bluefin by the insurer.

To find out more call Bluefin
0845 872 5060 or visit
www.hellenicleague.co.uk

Hellenic league group personal accident scheme Application

2011/12 season

1) Club details (Please complete sections 1 to 6, ensuring you sign the declaration on the back)

Club name _____ Secretary name _____

Address _____

_____ Postcode _____

Phone _____ Email _____

2a) Adult team cover Yes No

Please select the level of cover (see page 2) required and the number of teams.

Number of **adult 11 a side teams** _____ Scale of cover (1,2, or 3) _____

€	A
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2b) Adult team additional benefits cover required Yes No

Only complete this section if you require the adult additional cover (see page 2)

Simply multiply your number of teams specified above by: £31 per 11 a side team .

€	B
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3a) Youth team cover required Yes No

Please select the level of cover (see page 3) required and the number of teams.

Number of **youth 11 a side teams** _____ Scale of cover (Platinum, Gold, Silver or Bronze) _____Number of **youth Mini soccer teams** _____ Scale of cover (Platinum, Gold, Silver or Bronze) _____

€	C
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3b) Youth team additional benefits cover required Yes No

Only complete this section if you require the youth additional cover (see page 3)

Temporary Total Disablement for 16 to 18 year olds in permanent employment of 16 hours per week or more providing:

£20 per week, 14 day excess period, 52 week benefits period Number of teams _____ at £21 premium per team

€	D
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4) Inception

Please confirm the date you wish the cover to start (not before 1 July 11)

/ /20 to 30 June 2012

Please note: Cover cannot commence until this signed proposal form and payment have been received and accepted by the League.

5) Total premium

Please add the total premium due for all your teams.

Premium due €

A+B+C+D

please turn over

Please note that cover cannot commence until payment has been received by the league and the proposal form accepted by Bluefin

Bluefin

6) Group Personal Accident declaration

IMPORTANT: Please read the information below. **Your** application will not be accepted unless the declaration is signed.

Definitions

Some words in this application form are in bold and have particular meaning. Wherever they appear their particular meaning is given below:

We/us/our/ourselves: ACE European Group Ltd.

You/Your: Club Official, Club Secretary, Committee Member.

Insured Person: Person(s) specified in the Schedule as being insured person(s).

Material Facts Disclosure

It is **Your** responsibility to provide complete and accurate information to **Us** when applying for and throughout the life of this Policy. It is important that all statements made in the application, over the telephone, on claim forms and other documents are full and accurate. Please note that if **You** fail to disclose any material information to **Us** this could invalidate the insurance cover and could mean that part or all of a claim may not be paid.

Data Protection Statement

PLEASE READ this notice as it explains the purposes for which **We** will use the personal and sensitive personal data (information) which **We** hold.

We accept fully **Our** responsibility to protect the privacy of customers and the confidentiality and security of information entrusted to **Us**.

Where **You** have provided information about another person in connection with the purchase and/or performance of this insurance Policy **You** confirm that they have appointed **You** to act for them, that they have consented to the processing of their personal data, including sensitive personal data and they have consented to any possible future transfer of their information abroad. **You** also agree to receive on their behalf any data protection notices from **Us**.

We will use the information **You** have provided for;

- customer service
- handling claims

in connection with this accident insurance policy.

We may disclose information to **Our** service providers and agents for these purposes. The information **You** have provided may also be used for the purpose of fraud prevention including passing details to other insurers and regulatory bodies.

In the event that an **Insured Person** makes an injury related claim, **We** may need to obtain further Sensitive Personal information such as medical history in order to assess the claim. The claim form will explain in more detail how this Sensitive Personal data is handled.

If an **Insured Person** asks **We** will provide details of the information **We** hold in accordance with the applicable law.

Any information which is found to be incorrect will be corrected promptly. **We** may monitor and/or record **Your** communication with **Us** either **Ourselves** or by reputable organisations selected by **Us**, to ensure consistent servicing levels and account operation. **We** will keep information about **Insured Person(s)** only for so long as it is appropriate.

Contact Details for **Us**

The Customer Service Manager,

200 Broomielaw, Glasgow G1 4RU

Telephone: 0800 389 8425 (Within UK only)

E-mail: AGHcustserv.complaints@acegroup.com

Statement of Fact

Neither **You** or any manager, club official(s) or committee member(s) of the club now applying for this insurance have:-

- been convicted of or charged (but not yet tried) with a criminal offence other than (road traffic) motor offences
- received an official caution for a criminal offence within the last three years other than a (road traffic) motoring offence.

In respect of the club which is the subject of this insurance contract, or any other business which **You, Your** managers, club officials or committee members have been involved with, no insurer has ever:-

- declined, cancelled or refused any proposal of insurance;
- cancelled or declined to renew any insurance;
- imposed special terms or conditions.

If **You** are unable to confirm these statements, **You** must contact Bluefin immediately. These are all considered to be material facts.

- I declare that I have the authority of the club players and officials to supply any personal details.

- I declare to the best of my knowledge:

i In respect of the persons to be insured no insurer has declined to provide accident insurance or cancelled or refused to renew such insurance;

ii The above statements and particulars, whether written by me or by others on my behalf, are true and complete;

iii I have not withheld any material fact.

- I agree that this application and declaration shall be the basis of the contract between ACE European Group Ltd and ourselves, and I agree to accept the company's standard form of policy for this class of insurance.

Signature and position within club _____ Date _____

Payment method and where to send

Cover cannot commence until payment has been received by the Hellenic League and this signed proposal form has been accepted by Bluefin

Please return this form and payment to the Hellenic League secretary Brian King.