



Certificate of Currency

SPORTS GROUP PERSONAL ACCIDENT INSURANCE

INSURED: Sporting Shooters Association of Australia Inc
Sporting Shooters Association of [NSW] Australia Inc
Sporting Shooters Association of [QLD] Australia Inc
Sporting Shooters Association of [VIC] Australia Ltd
Sporting Shooters Association of [ACT] Australia Inc
Sporting Shooters Association of [TAS] Australia Inc
Sporting Shooters Association of [SA] Australia Inc
Sporting Shooters Association of [WA] Australia Inc
Sporting Shooters Association of [NT] Australia Inc

the executives, committees and sub committees, branches, affiliated clubs, members, range staff, coaches, trainers and voluntary workers whilst participating in insured activities.

INSURED PERSONS: All Associated Members
All Voluntary Workers of the Insured.

SCOPE OF COVER: For All Associated Members:

Whilst involved in the act of lawful Recreational Shooting Activities (excluding direct travel to & from such activities)

For All Voluntary Workers of the Insured:

Cover under the Policy applies whilst a Covered Person is engaged in voluntary work on behalf of the Policyholder, including necessary direct travel to and from such voluntary work. Provided always that any voluntary work is officially organised by and under the control of the Policyholder.

POLICY PERIOD: 30/11/2020 to 31/11/2021

POLICY NO: PRE/GPA-000947

INSURER: Certain Underwriter at Lloyds of London – 100%

MEMBERS: 194,663



GEOGRAPHICAL LIMIT: Worldwide

AGGREGATE LIMIT OF LIABILITY

Any one period of insurance \$2,000,000 Non schedule flights \$0 Any one event with respect to War / Civil War \$500,000 Any one period of insurance with respect to War / Civil War \$1,000,000

AGE LIMIT:

Between the ages of 12 and 80

It is hereby noted and agreed that clause 1 only under the Age Limitations provision is deleted in full and clause 3 is amended as follows:

3. In respect to each Covered Person aged ninety (90) years or over at the time of loss;

- a) cover under Part A, Event 1 (Accidental Death) and Events 3-19 are limited to a maximum of \$25,000; and
- b) no benefit is payable under Part A, Event 2, (Permanent Total Disablement); and
- c) no benefit is payable under Parts B & C, Events 25, 26, 27 or 28 (Weekly Benefits - Bodily Injury and Weekly Benefits - Sickness); and
- d) no benefit is payable under Non-Medicare Medical Expenses This will not prejudice any entitlement to claim benefits which has arisen before a Covered Person has attained the age of ninety (90) years.

ACCIDENT INSURANCE

PART A

Death Capital Benefits.

Voluntary Workers \$25,000 per member

All Other Insured Persons \$75,000 per member Limited to \$10,000 for persons aged under 18 years

Events 2 – 19 Voluntary Workers \$25,000 per member

All Other Insured Persons \$75,000 per member Limited to \$10,000 for persons Aged under 18 years

PART B

(INCOME EARNERS ONLY)

Voluntary Workers Weekly Injury Benefits 85% of income to a maximum of \$250 Per Week Excluded Period 28 Day



Excess Benefit Period 26 Weeks Bodily Injury resulting in surgery \$20,000.

All Other Insured Persons

Weekly Injury Benefits 85% of income to a maximum of \$750 Per Week.

Excluded Period 7 Day Excess Benefit Period 104 Weeks Bodily Injury resulting in surgery \$20,000.

PART C

Weekly Illness Benefits - Not Insured

PART D

Fractured Bones – Lump Sum Benefit \$5,000

PART E

Loss of teeth or dental procedures – limit per tooth \$250 Loss of teeth or dental procedures – lump sum benefit \$2,000

INJURY ASSISTANCE

(NON INCOME EARNERS)

Voluntary Workers / All Other Insured Persons Weekly Benefit \$250 Benefit Period 26 Weeks Excess 7 days

NON-MEDICARE MEDICAL EXPENSES

If during the Period of Insurance and whilst the person is a Covered Person acting on behalf of the Policyholder to:

a) provide services, without payment, to an educational, religious, charitable or benevolent organisation; or

b) engage in a sporting activity: i. in the capacity of a participant, adjudicator, judge, referee or umpire or in a similar capacity; or ii. as an official, or otherwise

to assist in the conduct of the sporting activity; or iii. in his or her capacity as an elected or appointed official of a sporting organisation; or

c) engage in youth activities organised by a voluntary organisation (for example, the Scout Association of Australia); or

d) undertake an activity that is part of an employment, education, training or youth program, or initiative, administered or funded by the Commonwealth, including specialist employment services for people with disabilities (where a law of a State or Territory relating to workers compensation does not apply), the



Covered Person suffers from a Bodily Injury, We will pay the Non-Medicare Medical Expenses incurred up to a maximum amount of \$3,000.

A co-payment of 15% applies to each and every claim.

No cover is provided for Covered Persons engaging in voluntary work experience with the Policyholder (except to the extent that they are engaged in providing services, without payment, to an educational, religious, charitable or benevolent organisation on behalf of the Policyholder, or otherwise undertaking activities as described above).

Non Medicare Medical Expenses means expenses incurred within twelve (12) months of sustaining a Bodily Injury and paid by a Covered Person or by the Policyholder for Doctor, physician, surgeon, nurse, physiotherapist, chiropractor, osteopath, hospital and/or ambulance services for the following treatments:

Medical	Surgical	X-ray	Chiropractic	Osteopathic
Physiotherapy	Hospital	Nursing	Treatment	

But does not include dental treatment, unless such treatment is necessarily required, to teeth other than dentures and is caused by the Bodily Injury referred to in (a) above. Any benefit payable under Non- Medicare Medical Expenses is less any recovery made from any private health insurance fund with respect to the expense. No benefit is payable in respect of the Medicare gap, being the difference between payment made by Medicare and the Medicare Benefits Schedule fee for the expense.

ADDITIONAL COVER

Return to work assistance \$20,000
Unexpired Membership Benefit \$5,000
Funeral expenses \$2,500
Coma Benefit \$500 per week Maximum weeks – 26
Modification Benefit \$20,000
Bed Care \$500 per week Maximum weeks – 26

DEFINITIONS:

Recreational Shooting, Bow Hunting and Target Archery:

It is hereby noted and agreed that following are additional general definitions under the policy.

Recreational Shooting means All lawful recreational shooting (including hunting) by members: and Includes Bow Hunting or Target Archery (except



where such activity is covered under the membership of another Shooting Association)

Bow Hunting or Target Archery activities approved by SSAA are as follows;
Recreational Bow Hunting by individual SSAA members in jurisdictions where this is permitted by law.

Target Archery competition and practice by SSAA members at SSAA and affiliated shooting ranges where approved by the SSAA or affiliated shooting club operating that range and permitted in that jurisdiction.

In witness thereof this Certificate has been signed by:

A handwritten signature in black ink, consisting of several fluid, connected strokes, positioned below the text "In witness thereof this Certificate has been signed by:".

Insurer: Certain Underwriters at Lloyd's

Date: 30th November 2020

Any enquiry or complaint relating to this Insurance should be referred to the Licensee shown above in the first instance. If this does not resolve the matter or you are not satisfied with the way a complaint has been dealt with, you should write to:
info@precisionunderwriting.com.au

DISPUTE RESOLUTION PROCESS

About Lloyd's

Lloyd's is the world's specialist insurance and reinsurance market, bringing together an outstanding concentration of underwriting expertise and talent. In Australia, Lloyd's is proud to be a member of the Insurance Council of Australia. Lloyd's has adopted the General Insurance Code of Practice subject to certain specific qualifications.

You can obtain a copy of the code at www.codeofpractice.com.au.

Our aim is to provide the highest service to Our Australian policyholders and. To this end. We have developed the following procedures for the fair handling of complaints from Lloyd's policyholders.

How can we help you?

There are established procedures for dealing with complaints and disputes regarding your policy or claim. Policyholders may be able to take advantage of the complaints services.



Stage 1

- a) We will respond to complaints within 15 business days provided We have all necessary information and have completed any investigation required.
- b) In cases where further information, assessment or investigation is required We will let You know as soon as reasonably practicable within the 15 business day timeframe and agree reasonable alternative time frames. If We cannot agree, We will treat Your complaint as a dispute and We will advise You of Your right to take Your complaint to Stage Two of the complaints process.
- c) We will keep You informed of the progress of Our response to the complaint at least every ten business days, unless You agree otherwise.
- d) When We respond to Your complaint, We will respond in writing and will tell You Our decision in relation to the complaint and the reasons for Our decision.

Stage 2

In the unlikely event that this does not resolve the matter for You are not satisfied with the way Your complaint has been dealt with, You should contact:

Lloyd's Australia Limited
Level 9, 1 O'Connell Street
Sydney NSW 2000
T: (02) 8298 0783
E: idraustralia@lloyds.com

We will usually require the following information:

- Name, address and telephone number of the policyholder;
- Details of the policy concerned (policy and/or claim reference numbers, etc.);
- Details of the insurance intermediary through whom the policy was obtained;
- Reasons why You are dissatisfied;
- Copies of any supporting documentation You believe may assist Us in addressing Your dispute appropriately.

Following receipt of Your complaint, You will be advised whether Your matter will be handled by Lloyd's Australia or the Lloyd's Complaints team in the UK, or what other avenues are available to You:

- Where Your complaint is eligible for referral to the Australian Financial Claims Authority (AFCA), Your complaint will generally be reviewed by a person at Lloyd's Australia with appropriate authority to deal with Your dispute.
- Where Your complaint is not eligible for referral to AFCA, Lloyd's Australia will refer Your complaint to the Lloyd's Complaints team in the UK if it falls within the



jurisdiction of the UK Financial Ombudsmen. They will review Your complaint and liaise directly with You.

- For all other matters You will be advised of what other avenues may be available to You.

How long will the Stage 2 process take?

Your complaint will be acknowledged in writing within 5 business days of receipt, and You will be kept informed of the progress of Our review of Your complaint at least every 10 business days. The length of time required to resolve a particular dispute will depend on the individual issues raised, however in most cases You will receive a full written response to Your complaint within 15 business days of receive, provided We have received all necessary information and have completed any investigation required.

EXTERNAL DISPUTE RESOLUTION

If Your complaint is not resolved in a manner satisfactory to You or We do not resolve Your complaint within 45 calendar days of receiving it at Stage 1, You may refer the matter to AFCA as follows:

AFCA can be contacted by:

Post: GPO Box 3, Melbourne VIC 3001

Phone: 1800 931 678

Email: info@afca.org.au

More information can be found on their website www.afca.org.au

AFCA is an independent body that operates nationally in Australia and aim to resolve disputes between You and Your insurer. AFCA provides fair and independent financial services complaint resolution that is free to consumers. Your dispute must be referred to AFCA within 2 years of the date of Our final decision. Determinations made by AFCA are binding on Us.

Customers not eligible for referral to AFCA, may be eligible for referral to the UK Financial Ombudsman Service. Such referral must occur within 6 months of the final decision by the Complaints team at Lloyd's.

Further details will be provided with their final decision to You.

How much will this procedure cost you?

This service is free of charge to policyholders.

The Underwriters accepting this insurance agree that:

- i. in the event of a dispute arising under this insurance, the Underwriters at the request of the Insured will submit to the jurisdiction of any competent Court in the Commonwealth of Australia;
- ii. any summons notice or process to be served upon the Underwriters may be served upon Lloyd's Underwriters' General



Representative in Australia (contact details are provided above), who has authority to accept service and to enter an appearance on the Underwriters' behalf;

- iii. if a suit is instituted against any one of the Underwriters, all Underwriters participating in this insurance will abide by the final decision of such Court or any competent Appellate Court.