

Policy Schedule

You will only be entitled to insurance cover under the section or sections which you have selected and for which you have paid the required premium.

Policy Number – PMEL99/0073208

The Insured	EASTERN FOOTBALL NETBALL LEAGUE INCORPORATED
Address	256 Scoresby Road Boronia 3155 Australia
Sport/Business	Football (Aust. R.)
Teams/Members	610 TEAMS
Period of Insurance	From 31/03/2025 to 31/03/2026, at 4:00 pm and any subsequent period for which the insured shall have paid and The Underwriter(s) shall have accepted the new premium.

Cover Details

SPORTS INJURY			
UNDERWRITTEN BY Certain underwriters at Lloyd’s & HDI Global Specialty SE-Australia under contract number B1750L240519 & SCA/2024 respectively			
Section 4.1	Capital Benefits	The percentage of this amount which is Payable for each of Events 1 to 14 is set out in the policy	\$ 100,000
Section 4.2.1	Medical Benefits	The percentage of the Medical Expenses covered under this section is	50%
Section 4.2.2	Physio Benefits	The percentage of physiotherapy expenses covered under this Section is	AS PER POLICY
The Excess payable for each claim under Section 4.2 is \$ 100 Excess The maximum amount payable per claim under Section 4.2 is \$ 2,000			
Section 4.3.1	Loss of Income	The amount payable is the lesser of 85% Net Income Lost or	\$ 200 Per Week
Section 4.3.2	Student Allowance		AS PER POLICY
Section 4.3.3	Domestic Home Help		AS PER POLICY
The Excess Period under Section 4.3 is 21 Days The Maximum Benefit Period under Section 4.3 is 52 Weeks			
Section 4.4	All benefits excluding 4.4.1		AS PER POLICY
Section 4.4.1	Injury Assistance	The maximum amount per claim is	\$ 1,500 Limit
Aggregate Deductible: \$350,000 subject to the separate claims agreement			
ENDORSMENTS			
Section 4.1 Capital Benefits			
Section 4.1 event 2 is deleted and replaced with: Paraplegia and Quadriplegia \$1,000,000			

Section 4.3.1 Weekly Income

The benefits Section 4.3.1 are below noting that these replace the benefits listed above under Section 4.3.1

85% of Gross Weekly Earnings (as per policy definition) up to a maximum of;

\$200 per week for weeks 1-7

\$300 per week for weeks 8-26

\$400 per week for weeks 27-52

Or 85% of the insured persons pre disability earnings whichever is the lesser.

Excess is 21 days

Issued subject to the terms of the attached Policy Wording and signed by the authorised Representative of Sportscover Australia Pty Ltd on behalf of the Underwriter/s detailed above.

**SIGNATURE**

28/03/2025

DATE

Premium

As Agreed

Printed by: A.B.