



A SUNCORP COMPANY

# Not-for-profit Organisations Public and Products Liability Insurance Application Form



POLICY NO:

REPRESENTATIVE NAME:

REFERENCE NUMBER:

## IMPORTANT NOTICES

It is very important that you read the information below and are satisfied you understand it. Please ask your GIO Adviser or broker to explain anything about which you are unsure.

For the purposes of this application "You" means the person applying for insurance in this application or on whose behalf insurance is applied for. "Your" has a corresponding meaning.

"You" includes directors, executive officers, employees and voluntary workers.

If more than one person or entity is to be insured, all questions apply to all persons and entities and the answers will be regarded as answers by all parties to this application.

"We", "Us" or "GIO" means GIO General Insurance Limited ABN 22 002 861 583

### 1. Duty of disclosure

Before You enter into this policy with Us, You have a duty, under the Insurance Contracts Act, to disclose to us every matter that You know, or could reasonably be expected to know, is relevant to Our decision whether to accept the risk of the insurance and, if so, on what terms.

You have the same duty to disclose those matters to Us before You renew, extend, vary or reinstate this policy.

Your duty however does not require disclosure of a matter:

- that diminishes the risk to be undertaken by us,
- that is of common knowledge;
- that We know or, in the ordinary course of Our business, ought to know; or
- as to which compliance with Your duty is waived by Us.

If You fail to comply with Your duty of disclosure, We may be entitled to reduce Our liability under Your policy in respect of a claim or may cancel the policy or both. If Your non-disclosure is fraudulent, We may also have the option of avoiding the contract from its beginning.

### 2. Hold harmless agreements

You must not enter into any agreement or make any admissions that have the effect of limiting or excluding Your or Our rights to recover damages from any other person without first obtaining Our written consent.

### 3. Participants exclusion

We will not be liable for claims in respect of;

- (a) Personal Injury to any person which arises directly or indirectly out of or caused by, through, or in connection with their participation in any capacity in:

- (i) any sporting or recreational activity. This includes but is not limited to racing, gymnastics, martial arts, flying, gliding, ballooning, animal riding, motor cycle riding, carnival/amusement rides, organised tours, camping, hiking, rafting, skiing or caving; or
  - (ii) or attendance at any demonstration, rally, march, procession or parade.
- (b) damage to any property which is attributable to its use in any sporting or recreational activity, demonstration, rally, march, procession or parade.

PROVIDED that this exclusion does not apply to claims in respect of Personal Injury to a spectator at a sporting or recreational activity.

#### **4. Voluntary Workers**

This policy does not cover your liability for Personal Injury to Volunteers or Voluntary Workers. The policy does cover claims made by third parties for personal injury or property damage caused by Voluntary Workers subject to the terms and conditions of the policy.

The definition of Volunteer or Voluntary Worker is as follows;

**“Volunteer/Voluntary Worker”** means any person engaged by You to perform work on Your behalf without fee, reward or remuneration whilst they are performing such work but this does not include a financial / paid-up member of Yours whilst engaged as a member in activities organised by You.

#### **5. Acceptance of this application**

The insurance under this policy will not be in force until the completed application has been received and the risk accepted by Us. We reserve the right to decline any application.

#### **6. Goods and services tax**

If You are entitled to an input tax credit for any portion of the premium for this policy or if Your entitlement to an input tax credit as disclosed to Us is incorrect or changes, then You must immediately let Us know in writing.

You should also tell Us Your Australian Business Number (ABN).

## **PRIVACY STATEMENT**

GIO General is a Suncorp company.

Suncorp is an Allfinanz group offering many different categories of financial products and services in banking, insurance, investments, and advice on financial services.

We need to collect personal information from Our customers so We can:

- ◆ set up and administer a product for the customer;
- ◆ determine a customer’s requirements and provide the appropriate product or service;
- ◆ assess a claim made by a customer under one or more of Our products;
- ◆ assess Our customers and their needs;
- ◆ improve Our financial products and services.

Without this information, We cannot provide the product or service.

**Protecting the privacy of our customers is a key part of our normal operations.**

As one of a number of companies that form the Suncorp group, we provide personal information about a customer to all the related companies within this group. We do not disclose personal information to any outside third party organisation, unless it is contracted to Suncorp to provide administrative services or activities on our behalf. In this case, We make sure that the third party is bound by the same privacy rules we follow.

Sometimes, the Suncorp Group might use personal information to make product related material on a range of financial products and services available to our customers. A customer may elect **not** to receive product related material by indicating below.

Please do not send product related material on the Suncorp Group's range of financial products and services.

A customer may change their mind at any time about receiving product related material by calling 13 10 10.

A customer may:

- ◆ access the personal information that We hold about them;
- ◆ get more information about Suncorp;
- ◆ obtain a copy of Our Privacy Policy;

by calling 13 10 10, or contacting Us at [www.gio.com.au](http://www.gio.com.au) or by visiting any of Our branches.

## NOT FOR PROFIT ORGANISATIONS PUBLIC & PRODUCTS LIABILITY INSURANCE APPLICATION FORM

*This policy will only be issued to eligible not-for-profit groups or associations (NFPO's). To be an eligible NFPO You must meet the following criteria. You must:*

1. *Be formed by a group of people with a community purpose that is lawful and is not carried on for the profit or gain of its individual members or owners; and*
2. *Provide a public benefit or serve a charitable purpose;*
3. *Support the social fabric of the community; and*
4. *Not be controlled by a business or government or semi-government sector; and*
5. *Not have an annual 'turnover' exceeding \$10,000,000.*

*'Turnover' means all revenue, receipts, fees, grants, subsidies, donations, gifts, subscriptions or any other types of funding received by the organisation.*

Based on the above criteria are You an eligible NFPO? Yes  No

*If You have answered NO to the above question, please discuss Your eligibility with Your GIO Insurance Representative.*

If You have answered Yes to the above question, please complete the application form below. All questions are to be answered. If there is insufficient space, please attach any additional information.

### FULL NAME OF ORGANISATION TO BE COVERED

### POSTAL ADDRESS

<b>POSTCODE:</b>

### CONTACT DETAILS

Contact Name:	Phone Number:	Fax Number:
Mobile Number:	Email:	
Website Address:		

PERIOD OF INSURANCE REQUESTED  /  / 20 TO 4:00 PM ON  /  / 20

### LIMITS OF LIABILITY

What limits of liability do You want for public and products liability? Please place a tick (✓) in the appropriate box. \$5,000,000  \$10,000,000  \$15,000,000  \$20,000,000

If You require a limit of liability above \$20,000,000 please specify:  \$

**YOUR ORGANISATION:**

Fully describe Your organisation (including subsidiaries):


Organisation’s National/State/Peak Body (if Applicable):

--

Australian Business Number (ABN)
% of GST payable on your premium that You are entitled to claim as an input tax credit <span style="float: right;">%</span>

Is Your organisation incorporated:? Yes  No

*Note: As an unincorporated association legal liability may be imposed on the members personally. We recommend You seek legal advice regarding the benefits of incorporation.*

Do You operate licensed premises:? Yes  No

How long have You been established:?  Years

Are any activities conducted overseas? Yes  No

**YOUR ACTIVITIES:**

Describe all Your organisation’s activities/functions (current and planned) including but not limited to any fundraising activities. You should include activities that do not generate an income:


Do You engage in any of the following activities? If so, please place a tick (✓) in the box provided. To assist Us to understand the nature of these activities (other than Excluded Activities for which no cover is provided) We may require You to complete a supplementary questionnaire.

Activity	✓	Activity	✓	Activity	✓
Accommodation e.g. short term, boarding houses, hostels, women's refuge, emergency accommodation, caravan park, holiday farms etc		Sporting / Recreational Facilities		Excluded Activities <sup>3</sup> -Watercraft > 8 metres, amusement rides, motor sports, railways, fireworks, wharves, live rock/pop concerts, swimming pool operators, carnivals, circuses, horse/pony clubs, rodeos, recreational parks, religious institutions, golf clubs, caving, discos, skateboard parks, extreme sports, short term events, demolition, extreme sports.	
Aged Care Services / Nursing Home / Respite Care		Health & Fitness / Wellbeing Exercises & Services		Sports & Fitness Training	
Employment Placement Services / Apprenticeships / Traineeships		Martial Arts		Swimming / Water Based Recreational Activities	
Horse Agistment		Parades / Protest Marches		Watercraft Repair and/or Maintenance	
Playground ownership, operation, installation or maintenance		Dry hire of plant or equipment		Youth Programs / Activities	
Childcare Services		Functions/ Conventions/ Dances/ Parties >100 people <sup>1</sup>		Boat slips, ramps or pontoons	
Entertainment /Shows / Live Performances		Camps – Day and Overnight		Construction/Alterations/ Extensions/Refurbishment exceeding \$5,000 annually	
Fete / Fairs / Festivals /Markets (incl Stall markets) > 500 attendees or 20 stalls <sup>1</sup>		Sporting / Recreational Activities <sup>2</sup> (not mentioned elsewhere in this table)			

<sup>1</sup> If You do not arrange, organise, plan, prepare, operate, run or provide the facilities for these activities, You are not required to tick the box i.e. if You simply take part in these events e.g. as a stallholder, You are not required to provide further information unless You require participation cover for sporting and recreational activities at these events.

<sup>2</sup> "Sporting recreational activities" includes but is not limited to horse riding, camping, bushwalking / hiking, swimming, abseiling, flying, ball games, paintball, climbing, caving, skiing, white water rafting, canoeing, kayaking, mountain biking, motorcycle riding, base jumping, hang gliding, ballooning, rope courses and gymnastics.

<sup>3</sup> "Excluded Activities" are those activities in respect of which We are unable to provide You with insurance cover. The list of activities is not complete and We will inform You at the time of quoting, or before renewal, of any other activity which You have disclosed to Us but for which We are unable to provide insurance cover.

## LOCATION OF ORGANISATION

Please provide the following details for all properties owned and/or occupied by You:

[Please tick (✓)]

Property Address	Owned by you	Leased to you	Occupied by you	
			YES	NO
1.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Do You hire out or plan to hire out any properties (including vacant land) to third parties?

Yes  No

If Yes, please state:

Number of storeys	
Fenced	Yes <input type="checkbox"/> No <input type="checkbox"/>
Type of property e.g farm, commercial office, retail shop	
Size of property in square metres	

## ORGANISATION'S PEOPLE:

	Full Time	Part Time
Number of Paid Employees:		
Number of members (incl office bearers):		
Number of office bearers:		

## VOLUNTARY WORKERS

No of voluntary workers	Average number of hours worked per voluntary worker each week	Equivalent number of full time paid employees

What are the main activities / functions performed by Volunteers?


*Note: Information regarding Voluntary Workers is needed to help Us in the overall assessment of the risk. Please see the important notices about Voluntary Workers at the front of this application form.*

## TURNOVER

Annual turnover:

\$	
----	--

Turnover means all revenue, receipts, fees, grants, subsidies, donations, gifts, subscriptions or any other types of funding received by the organisation.



## INSURANCE HISTORY

Please provide the public liability insurance history of Your organisation:

	Public / Products Liability Insurance
Insurer:	
Limit of Liability:	
Expiry Date:	
Annual Premium:	

Has any insurer ever declined or refused to renew, cancelled or imposed special terms or conditions on any of Your insurance ? Yes  No

If Yes, please provide details:


Have any public and products liability claims been made against You or incidents reported to You that may give rise to a claim in the last 5 years regardless of whether such claims were covered by insurance or not ? Yes  No

If Yes, please provide details of accident date, nature of injury or damage, amount paid, reserve if still outstanding:


## RISK MANAGEMENT

Describe the risk management procedures You have in place to identify, measure and prevent risks which may cause Personal Injury or Property Damage.


## HIRED LABOURERS / CONTRACTORS / SUB-CONTRACTORS:

Do You engage hired labourers, contractors or any other persons to perform work on Your behalf or under Your control or supervision but who are not Your employees. This does not include persons engaged for the regular maintenance of Your premises and equipment where the value of such work does not exceed \$5,000 ? Yes  No

If Yes, are You indemnified for all liabilities arising from the work carried out for You by such people? Yes  No

*Note: You should answer 'No' to this question unless You have obtained a written promise from each of the persons or entities referred to in the above question that they will be responsible (and You won't be) for any loss suffered by, or caused by, these persons as a result of their engagement by You.*

## PRODUCTS:

Do You design, manufacture, grow, extract, produce, process, assemble, construct, erect, install, repair, service, treat, sell, supply, re-supply or distribute any product in the course of Your activities. These will be referred to as 'Your Products'? Yes  No

*If Yes, please state:*

Nature of Your Products	
Intended use of Your Products	
Estimated annual turnover from sale of Your Products	\$
Details of Your quality control procedures	

## PROPERTY IN YOUR PHYSICAL OR LEGAL CONTROL:

The standard policy provides \$20,000 cover for Your liability for property not owned by You but in Your physical or legal control.

Do You require additional cover above the standard limit? Yes  No

*If Yes, please state:*

What additional Limit of Liability do You require	\$
Nature of property not owned by You but in Your physical or legal control e.g. laptops, animals, electrical goods	
If cover is only required for short term event, the duration and date of event e.g. 3 days from 18th to 21st March	

*Note: You do not need to disclose to Us premises which are leased or rented to You for the purpose of carrying on Your business. Where You are required in any lease or rental agreement to insure premises or other property You should arrange property or material damage insurance on this property.*

## PARTICIPATION

We may agree to extend the standard policy to cover claims in respect of Personal Injury arising from the participation in certain specified sport and recreational activities. If participation cover is granted by Us, the maximum sub-limit of liability available will be \$2million for all claims during any one period of insurance. An excess of \$1,000 will apply to each claim. An additional premium is payable for this policy extension.

This extension will not be available for extreme sports or high risk recreational activities.

*In relation to NFPO's only, We will not regard the following as sporting or recreational activities:*

- ◆ *organised day bus tours by independent third party operators that hold public liability insurance*
- ◆ *organised day trips to doctors, theatres, shops, picnics (except participation in sporting games), museums, galleries, shows*
- ◆ *stage audience participation*
- ◆ *fashion parades, beauty contests*
- ◆ *ballroom, line or social dancing, card and board games, leatherwork, quilting, painting on canvas and fabric, art , woodcarving, handicraft, music and languages*
- ◆ *eisteddfod events (music, speech, drama and dance)*
- ◆ *theatrical performances other than where animals, weapons, pyrotechnics, stunts or acrobatics are involved*
- ◆ *spectating at a sporting or recreational activity.*

*Do You require Participation cover?*

Yes  No

*If Yes, please state:*

The recreational or sporting activities for which participation cover is required	
Age range of persons involved e.g 10 years to 21 years	
Maximum number of persons involved at any one time	
Normal frequency of the recreational or sporting activities e.g daily, weekly, fortnightly	
Annual turnover derived from the recreational or sporting activities	\$
Are recreational or sporting activities conducted by qualified leaders/instructors	Yes <input type="checkbox"/> No <input type="checkbox"/>

## **DECLARATION**

I/We acknowledge having been clearly informed of the nature and effect of My/Our Duty of Disclosure.

I/We declare that the information contained in this application is true and correct in every particular and that I/We have not withheld any material information and acknowledge that GIO General Limited will rely on this information in deciding whether to give cover and on what terms.

Where answers in this application are not in My/Our own handwriting, they have been checked by Me/Us and I/We certify they are correct.

By signing this application, I/We agree to GIO collecting, using and disclosing My/Our personal information, including sensitive and health information if applicable, in accordance with the Privacy Statement included in this document and the GIO Privacy Policy.

I/We will not be covered until GIO General Limited accepts this application.

SIGNATURE:

DATE:

YOUR OFFICIAL POSITION WITHIN THE ORGANISATION:

FULL NAME OF ORGANISATION:

This page is intentionally blank

This page is intentionally blank

## Who we are

This insurance is issued by  
GIO General Limited  
ABN 22 002 861 583.  
Level 18  
36 Wickham Terrace  
Brisbane Qld 4000

## How to contact us

- Phone us.
- For questions or to change your details 13 10 10.
- For claims 13 14 46.
- Come into one of our branches.
- Find us on the web at [www.gio.com.au](http://www.gio.com.au)

**13 10 10**  
[gio.com.au](http://gio.com.au)



A SUNCORP COMPANY